



Issuance Date: December 12, 2008
Closing Date: February 17, 2009
Closing Time: 10:00 AM Eastern Standard Time (EST)

Subject: Request for Applications (RFA) No. USAID-M-OAA-GH-09-298
FY-2009 Child Survival and Health Grants Program (CSHGP).

The United States Agency for International Development (USAID) Bureau for Global Health, Office of Health, Infectious Disease and Nutrition (GH/HIDN) is seeking applications from U.S. Private and Voluntary Organizations (PVOs) and Non-Profit, Non-Governmental Organizations (NGOs), engaged in international health and development, to implement activities under the Child Survival and Health Grants Program (CSHGP).

For the purposes of this RFA, the term "Grant" is synonymous with "Cooperative Agreement"; "Grantee" is synonymous with "Recipient"; and "Grant Officer" is synonymous with "Agreement Officer".

The authority for the RFA is found in the Foreign Assistance Act of 1961, as amended.

For the purposes of this program, this RFA is being issued and consists of this cover letter and the following:

1. Section A – Program Description;
2. Section B – Selection Criteria;
3. Section C – Grant Application Guidelines;
4. Section D – Required Forms, Certifications, Assurances, and Other Statements of Recipient;
5. Section E – Standard Provisions for U.S. Nongovernmental Recipients;
6. Annexes.

The preferred method of distribution of USAID procurement information is via the Internet. This RFA and any future amendments can be downloaded from the Agency Web Site. The World Wide Web Address is <http://www.grants.gov>.

Applications must be received by the closing date and time indicated at the top of this cover letter at the place designated below for receipt of applications. Applications and modifications thereof shall be submitted in sealed envelopes with the name and address of the applicant and RFA # (referenced above) inscribed there on, to:

U.S. Postal Service Mailing Address:

USAID/M/OAA Room 7.09-92
Ronald Reagan Building
U.S. Agency for International Development
1300 Pennsylvania Avenue, NW
Washington, DC 20523-3100
Attention: Mr. Ousmane Faye, Jr.

All Other Means of Delivery:

Attn: USAID/M/OAA Room 7.09-92
Ronald Reagan Building
U.S. Agency for International Development
1300 Pennsylvania Avenue, NW
Washington, DC 20004-3100
Please use phone at visitor's desk to contact:
Mr. Ousmane Faye, Jr., at x2-0832.

Additionally, a copy of the complete application must be sent to the **USAID Mission** in the country of the proposed program by close of business **February 24, 2009**. It is the responsibility of the applicant to ensure that the USAID Mission receives a copy. See Annex D for the current Mission addresses.

Note: Couriers must enter the building using the 14th Street entrance. At the guard/reception desk, dial Extension 2-0832.

Telegraphic or fax applications are not authorized for this RFA and will not be accepted.

All applicants delivering applications contained in boxes through carriers other than UPS, FedEx, and the US Post Office will be required to complete a Freight Delivery Request Form and provide this form to the Ronald Reagan Building (RRB) ITC Loading Dock Manager **72 hours in advance** of delivery (contact information is provided in the form). The form may be obtained from Ousmane Faye, Jr. who may be reached by telephone at 202-712-0832 or ofaye@usaid.gov. Once an RRB loading dock representative accepts the delivery, this will be considered the actual time of USAID's acceptance. Electronic submission of applications is acceptable via the www.Grants.gov website. However, submission of hard copies is a requirement (see Section C – Application Guidelines for more information).

Applicants should retain for their records one copy of all enclosures which accompany their application.

Pursuant to 22 CFR 226.81, it is USAID policy not to award profit under assistance instruments. However, all reasonable, allocable and allowable expenses, both direct and indirect, which are related to the agreement program and are in accordance with applicable cost standards (22 CFR 226, OMB Circular A-122 for non-profit organization, OMB Circular A-21 for universities, and the Federal Acquisition Regulation (FAR) Part 31 for profit organizations), may be paid under the agreement.

USAID reserves the right to fund any or none of the applications submitted in response to this RFA. Awards will be made subject to the availability of funds. This FY 2009 RFA does not commit USAID to funding a specific number of applications from new or established partners. The applications funded in the 2009 fiscal year will depend on availability of funds, the programs' fit within the State Department's strategy on foreign assistance, and the quality of proposals. Pipeline budgets of existing programs as well as expected 2009 funding will be taken into account in determining the amount of funding awarded in 2009.

Issuance of this RFA does not constitute an award commitment on the part of the Government, nor does it commit the Government to pay for costs incurred in the preparation and submission of an application. Further, the Government reserves the right to reject any or all applications received. In addition, final award of any resultant grant(s) cannot be made until funds have been fully appropriated, allocated and committed through internal USAID procedures. While it is anticipated that these procedures will be successfully completed, potential applicants are hereby notified of these requirements and conditions for award. Applications are submitted at the risk of the applicant; should circumstances prevent award of a cooperative agreement, all preparation and submission costs are at the applicant's expense.

In the event of an inconsistency between the documents comprising this RFA, it shall be resolved by the following descending order of precedence:

- (a) Section B - Selection Criteria;
- (b) Section C - Grant Application Guidelines;
- (c) Section A - Program Description;
- (d) This Cover Letter.

Any prospective applicant who has questions concerning the contents of this RFA should submit them **in writing** to Nazo Kureshy (nkureshy@usaid.gov) and Ousmane Faye (ofaye@usaid.gov) by 5:00 PM EST on **December 29, 2008**. Any additional information regarding this RFA will be furnished through an amendment to this RFA.

Important highlights:

- The FY09 RFA continues to strengthen the program's primary focus on innovation and operations research to generate solutions for addressing critical delivery challenges and strengthening health systems.
- The list of eligible countries for all categories has been updated, and **all eligible countries are weighted equally**.
- The ceiling amounts have increased from \$1.25 to \$1.5 million for the New Partner Category and \$1.6 to \$1.75 million for the Innovation Category.
- In the Innovation Category, up to \$200,000 may be budgeted for Operations Research in order to generate credible evidence that can be utilized at the national and global levels.
- Evaluation criteria and corresponding guidance have been refined for all three categories.
- TB elements, sub-elements, and indicators are provided as an annex.

Thank you for your consideration of this USAID initiative. We look forward to your organization's participation.

Sincerely,

Bruce Baltas
Agreement Officer

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ACRONYM LIST

ACSM	Advocacy, Communication and Social Mobilization
AIDS	Acquired Immune Deficiency Syndrome
BCC	Behavior Change Communication
BCG	Bacille Calmette-Guérin
CBO	Community-based Organization
CORE	Child Survival Collaborations and Resources Group
CSHGP	Child Survival and Health Grants Program
CSTS+	Child Survival Technical Support Plus Project
DHS	Demographic and Health Survey
DIP	Detailed Implementation Plan
DOT	Directly Observed Therapy
DOTS	Directly Observed Therapy, Short-Course
DPT	Diphtheria, Pertussis, Tetanus
FAR	Federal Acquisition Regulation
FBO	Faith-based Organization
FY	Fiscal Year
GH	Bureau for Global Health
GFATM	Global Fund for AIDS, Tuberculosis, and Malaria
HIDN	Office of Health, Infectious Diseases, and Nutrition
HIV	Human Immunodeficiency Virus
HMIS	Health Management Information Systems
IEC	Information, Education, and Communication
IMCI	Integrated Management of Childhood Illnesses
IPTp	Intermittent Preventive Treatment in pregnant women
IRS	Indoor Residual Spraying
ITN	Insecticide Treated Net
IYCF	Infant and Young Child Feeding
KPC	Knowledge, Practices, and Coverage Survey
LOE	Level of Effort
LLIN	Long Lasting Insecticide Treated Net
MAMAN	Minimum Package for Mothers and Newborns
MCHIP	Maternal and Child Health Integrated Project
MCP	Malaria Community Programs
M&E	Monitoring and Evaluation
MNCH	Maternal, Newborn, and Child Health
MOH	Ministry of Health
MOU	Memorandum of Understanding
NGO	Non governmental Organization
NTP	National Tuberculosis Program
ORS	Oral Rehydration Salt
OAA	Office of Acquisition and Assistance
ORT	Oral Rehydration Therapy
PEPFAR	U.S. President's Emergency Plan for AIDS Relief
PMI	Presidential Malaria Initiative

PMTCT	Preventing Mother-to-Child Transmission
PR	Program Results
PVO	Private Voluntary Organization
RFA	Request for Application
RRB	Ronald Reagan Building
TB	Tuberculosis
TRM	Technical Reference Materials
USAID	United States Agency for International Development
WHO	World Health Organization
XDR TB	Extensively Drug Resistant Tuberculosis

SECTION A: PROGRAM DESCRIPTION

I. Introduction

The fiscal year (FY) 2009 RFA for the Child Survival and Health Grants Program (CSHGP) focuses on innovation in delivery strategies for high impact maternal, newborn, and child health (MNCH) interventions. This focus continues to strengthen a major shift in the program and in the criteria for selecting grantees and is closely aligned with the USAID Global Health Bureau's mandate for innovation and technical leadership. In addition, the RFA is seeking to attract new partners to contribute to innovation and expand and improve the capacity of partners to contribute to the Stop Tuberculosis (TB) strategy interventions in targeted countries to meet global TB targets.

The FY09 RFA will solicit proposals from U.S. Private Voluntary Organizations (PVOs)/Non Governmental Organizations (NGOs) to be reviewed and recommended for award in FY 2010. The RFA will make awards in three grant categories: up to two awards in the New Partner category (each up to \$1.5 million, 4-5 years; total estimated cost of two awards: \$3,000,000); approximately five awards in the Innovation category (each up to \$1.75 million, 4-5 years; total estimated cost of five awards: \$8,750,000); and one award in the TB category (up to \$1.5 million, 5 years; total estimated cost: \$1,500,000).

II. CSHGP Objectives

The objectives of the FY09 CSHGP are to:

1.) Pilot and analyze new approaches to introduce and scale up interventions in diverse community settings, including urban and post-conflict settings.

CSHGP will introduce and analyze innovations that address the most critical barriers to community access to high impact interventions that prevent or treat the major causes of maternal and child mortality and malnutrition, such as antenatal care and skilled birth attendance; postnatal and newborn care; breastfeeding, appropriate child feeding, and management of acute severe malnutrition; immunization; vitamin A and zinc supplementation; and prevention and treatment of diarrhea, pneumonia, and malaria.

2.) Contribute to the solution of key operational barriers to scaling up delivery of these interventions through the provision of technical leadership and specialized technical resources.

The CSHGP will generate specialized technical resources and tools for Program Managers and Ministry of Health (MOH) staff that are responsible for designing and monitoring community oriented programs as well as systematizing program achievements and learning from multiple country settings to facilitate global learning and leadership. CSHGP will leverage the technical resources of a broad network of PVOs/NGOs through CORE and the technical expertise in the USAID-funded Maternal and Child Health Integrated Project (MCHIP) and USAID/GH staff and partners in order to develop state-of-the art technical resources that are widely used by PVOs/NGOs

and their local partners (MOH, local NGOs) in USAID and larger health and development communities.

3.) Disseminate evidence and lessons for proven models for the delivery of high impact integrated interventions.

CSHGP's partnership model facilitates NGOs to organize into technical working groups and communities of practice according to their comparative advantage and technical interests that are responsive to GH/USAID priorities.

These three CSHGP objectives showcase the importance of implementing projects that utilize innovative community oriented delivery strategies and address key operational barriers to scaling up delivery of high impact MNCH interventions to ensure sustained health outcomes. They reflect the contributions of communities of practice and collaboration and specialized technical assistance that contribute to advances in community oriented programming and policies.

III. Overview of the CSHGP

Since 1985, USAID has supported community oriented CSHGP projects implemented by U.S. PVOs/NGOs and their local partners. The purpose of this program is to contribute to sustained improvements in child survival and health outcomes by supporting the innovations of PVOs/NGOs and their in country partners in reaching vulnerable populations.

The CSHGP is housed in the Bureau for Global Health's Office of Health, Infectious Diseases and Nutrition (GH/HIDN). For more information about the CSHGP, refer to:

http://www.usaid.gov/our_work/global_health/home/Funding/cs_grants/cs_index.html.

Within the Foreign Assistance Framework, the CSHGP contributes to the Investing in People objective and its supporting elements, e.g. MCH, TB, Malaria, and their respective sub-elements.

The three main program components of the CSHGP include:

(1) PVO/NGO Cooperative Agreements: Each year, new cooperative agreements are awarded to support community oriented health programs in specific child survival and health technical areas. The current portfolio consists of approximately 56 projects in 31 countries.

(2) CORE Group: The CSHGP supports the CORE Group (Collaborations and Resources for Child Survival), a network organization of 48 NGO members collectively working in over 180 countries. CORE's mission is to strengthen local capacity on a global scale to measurably improve the health and well-being of children and women in developing countries through collaborative NGO action and learning. NGOs participate in CORE's eight working groups in the following areas: Integrated Management of Childhood Illnesses (IMCI), Malaria, Monitoring and Evaluation, Nutrition, Safe Motherhood and Reproductive Health, Social and Behavioral Change, HIV/AIDS, and Tuberculosis. Organizations interested in participating in CORE Group activities and learning more

about the child survival community should consider joining the network. For more information, see the CORE website: <http://www.coregroup.org/>.

(3) Specialized Technical Assistance from the Maternal and Child Health Integrated Program (MCHIP): CSHGP will receive specialized technical assistance from MCHIP. MCHIP integrates the functions of the Child Survival Technical Support Plus (CSTS+) Project into the Global Health Bureau's flagship project for maternal and child health.¹ MCHIP is a Leader with Associates Cooperative Agreement with a JHPIEGO-led consortium, which includes Macro International, Inc. MCHIP is designed to support the introduction, scale up, and further development of high impact MNCH interventions, including program approaches to effectively deliver those interventions to achieve measurable reductions in under-five and maternal mortality and morbidity. MCHIP will form an operations research (OR) committee to provide consistency in approaches across awards and technical guidance for research designs. One of MCHIP's strategic objectives focuses on assisting PVOs/NGOs and their local partners supported by CSHGP and PMI Malaria Community Programs (MCP) to design, implement, monitor, and evaluate innovative, effective, and scalable community oriented strategies.

IV. Technical Interventions

All technical guidance and relevant tools for designing, implementing, and evaluating the interventions can be found on <http://www.childsurvival.com> [e.g. Technical Reference Materials (TRMs), Minimum Package for Mothers and Newborns (MAMAN) framework, Rapid Health Facility Assessment (RHFA), and Knowledge, Practice, and Coverage (KPC) survey]. Applicants should familiarize themselves with these materials, which provide guidance for developing strategic high impact intervention packages. For TB applicants, please consult Annex B for new recommended TB indicators.

Selection and integration of technical interventions should be guided by the disease burden and the health system capacity.² Evidence-based technical interventions that support the CSHGP objectives are listed below.

Immunization: Strengthening routine immunization (DPT, BCG, Measles); expanding coverage and assessment; improving surveillance methods; improving quality and safety of products; strengthening the cold chain; and support of polio vaccination programs.

Vitamin A/Micronutrients: Improving coverage and supplementation of vitamin A for children under five; integrating vitamin A supplementation with the expanded program for immunization, deworming, and child health days; promoting dietary intake of micronutrient-rich foods; strengthening and promoting maternal and/or child anemia packages that provide iron

¹ MCHIP will merge the functions of several current USAID/GH projects (ACCESS, BASICS III, Immunization BASICS, POPPHI, and CSTS+) to improve efficiency and effectiveness, and to support Mission needs for integrated MCH programs.

² Applicants are encouraged to review the list and descriptions of evidence-based, high impact MCH interventions on page 10 of the USAID report to Congress entitled "Working Toward the Goal of Reducing Maternal and Child Mortality: USAID Programming and Response to FY08 Appropriations" at http://www.usaid.gov/our_work/global_health/mch/publications/mch_report.html.

supplementation in conjunction with improved dietary intake, deworming, or malaria control as appropriate.

Infant and Young Child Feeding (IYCF): Promoting exclusive breastfeeding for children 0-5 months; promoting appropriate feeding for children 6-23 months including continued breastfeeding, appropriate number of feeds per day, a diverse diet with nutrient-dense foods, adequate quantity of food with appropriate consistency, and feeding during and after illness; promoting optimal nutrition for women; improving nutrition counseling especially during key contact points such as community-based nutrition activities, antenatal care, delivery, well-child visits, sick child visits, and growth promotion; and strengthening community support for optimal IYCF practices.

Control of Diarrheal Disease: Improving family and community practices for diarrheal disease prevention, including hand washing with soap, safe transport, correct storage and handling of drinking water; promotion of point-of-use treatment of water; safe disposal of feces; hygiene promotion and improving water and sanitation technologies; strengthening of enabling environments to reduce the incidence of diarrheal disease; improving recognition and appropriate treatment of diarrheal disease at the facility and community level; supporting the revision of policy guidelines to endorse the use of low osmolarity Oral Rehydration Salt (ORS) with zinc treatment to improve to improve diarrhea case management for children; and expanding access to and use of low osmolarity ORS and zinc treatment; and reinvigorating Oral Rehydration Therapy (ORT) practices.

Pneumonia Case Management: Ensuring adequate access to pneumonia case management, which includes high quality facility- and community-based treatment; promoting timely recognition of pneumonia by caretakers and prompt care seeking from appropriate health providers; supporting an integrated package to strengthen case management such as improving skills of health workers, improving health system support, and improving family practices and community services.

Prevention and Treatment of Malaria: Promoting intermittent preventive treatment in pregnant women (IPTp); expanding ownership and use of insecticide treated bednets (ITNs), with emphasis on long-lasting nets (LLINs); improving malaria case management (including diagnosis) at the facility and community levels; promoting care-taker recognition of fever in children under five and prompt care-seeking behavior; applications should not include activities related to indoor residual spraying (IRS).³

Maternal and Newborn Care: Improving birth preparedness and complication-readiness planning; access to focused antenatal care (including education and counseling for healthy timing and spacing of pregnancy); promotion of tetanus toxoid immunization; promoting skilled attendants for birth and improving skills of providers; promotion of clean delivery and infection control; employing appropriate household- and community-based strategies where access to skilled care is difficult, including referral; promoting active management of third stage of labor; improving access to quality postnatal (mother and newborn) care and appropriate postnatal messaging (including education and

³ In PMI countries (Angola, Benin, Ghana, Kenya, Liberia, Madagascar, Malawi, Mali, Mozambique, Rwanda, Senegal, Tanzania, Uganda, Zambia and Ethiopia), CSHGP projects should be implemented in collaboration with PMI efforts and priorities in country, which are based on close planning with National Malaria Control Programs (NMCPs). See the PMI website at www.pmi.gov for more information. In all countries, projects should be consistent with NMCP strategies and approaches. *Please note that malaria interventions are not restricted to PMI focus countries or regions.*

counseling for healthy timing and spacing of pregnancy); promoting essential newborn care practices for all newborns including thermal care, cord care, and immediate and exclusive breastfeeding; and sick newborn care including identification and treatment of neonatal infection and complications, resuscitation, and special care of premature and low birth weight infants.

HIV/AIDS: Grant activities may include the strengthening or establishment of linkages between MNCH services and HIV/AIDS related services for women and children, where these linkages will serve to strengthen both types of service, i.e. strengthening the link of MNCH services providing antenatal, delivery, and post-partum care with preventing mother-to-child transmission (PMTCT) services, to produce improvement in those maternity services as well as increased uptake of PMTCT and improved follow-up, care, and treatment of HIV-exposed infants and HIV-positive mothers; strengthening routine child health services, including community-based services, to support improved detection, care, and treatment of HIV-positive infants and children; integration of safe water, hygiene, and sanitation into PMTCT services as well as into the care and support of HIV-positive mothers and HIV-exposed children. Since CSHGP funding is not HIV-specific funding, it is important that any proposed activities related to HIV detection, care, and treatment be designed in ways that also strengthen routine MNCH services for the broader population of women and children in the target population.

Tuberculosis⁴: Expanding community-based TB programming; providing care and support to people with TB; improving detection and diagnosis using quality-assured bacteriology and standardized treatment with supervision and patient support; ensuring a reliable drug supply and management system; improving monitoring and evaluating systems through host country strategic information systems; improving management of TB/HIV co-infection; addressing multi-drug resistant TB; and advocating for political commitment. Care and support includes community participation in TB care and prevention, community education and social mobilization, empowering communities using the patient charter for TB care, using enablers to help patients adhere to treatment, and engagement of civil society organizations.

V. Funding Categories

The following three funding categories are offered under this RFA to eligible applicants:

- New Partner (4-5 years, up to \$1,500,000)
- Innovation (4-5 years, up to \$1,750,000)
- Tuberculosis (5 years, up to \$1,500,000)

Interested applicants have the option of submitting up to two applications in response to this RFA as long as one of the two applications is submitted under the TB category (see Application Limitations in Section B: Selection Criteria). Applicants should weigh the strengths and capabilities of their organizations when considering which funding category to apply under and the number of applications to submit. Applications will be competed within each category rather than across the three categories.

⁴ Applies only to TB category applicants.

VI. Eligible Country List

USAID Missions indicate their interest and add their countries to the eligible country list annually when they believe U.S. PVOs/NGOs can play a critical role in reducing infant, child, maternal, and infectious disease-related morbidity and mortality rates. CSHGP projects serve as important demonstration sites for influencing programming and policy at the national and global levels.

New Partner and Innovation Category Eligible Countries:⁵

Africa	Asia & Near East	Europe & Eurasia	Latin America & Caribbean
Angola Benin Burkina Faso Burundi Cameroon Cape Verde Chad Cote d'Ivoire DR Congo Ethiopia Equatorial Guinea Gabon The Gambia Ghana Guinea Guinea-Bissau Kenya Liberia Madagascar Malawi Mali Mauritania Mozambique Namibia Niger Nigeria Rwanda Sao Tome/Principe Senegal Sierra Leone Somalia South Africa Sudan Tanzania Togo Uganda Zambia	Afghanistan Bangladesh Cambodia East Timor India Indonesia Laos Nepal Papua New Guinea Philippines Thailand Vietnam Yemen	Armenia Azerbaijan Georgia Kyrgyzstan Russia Tajikistan Turkmenistan Ukraine Uzbekistan	Dominican Republic Ecuador El Salvador Haiti Honduras Nicaragua Peru

⁵ All countries are weighted equally for the CSHGP FY09 RFA. The proposed project's strategic fit and relevance within a country context remain important. For reference, countries in bold are USAID MCH initiative priority countries, which are characterized by both high magnitude and severity of maternal and child deaths and meet other criteria, including country capacity and commitment and potential for interaction with other U.S. Government resources. See http://pdf.usaid.gov/pdf_docs/PDACL707.pdf (p.7).

Tuberculosis Category Eligible Countries:

Africa	Asia & Near East	Europe & Eurasia	Latin America & Caribbean
DR Congo Ethiopia Mozambique Nigeria South Africa Tanzania Uganda	Cambodia	Russia Ukraine	Brazil

SECTION B: SELECTION CRITERIA

I. Eligibility Requirements

Organizations must meet the following criteria to apply for a CSHGP grant.

A. Status: U.S. PVO (any Category) or U.S. NGO (New Partner Category only). Please see below for additional information on organizational status.

1. U.S. PVOs

A U.S. PVO is defined as a U.S. non governmental organization that meets the first four Conditions of Registration as outlined in Part 203, Chapter II, Title 22 of the Code of Federal Regulations in USAID's Automated Directives System. To be registered, a U.S. PVO also must meet the second four Conditions of Registration, which establish standards to be met on an annual basis (see Annex A for a list of these eight Conditions). **If an organization meets the criteria of a U.S. PVO, the organization must be registered or in the process of registration with USAID as a U.S. PVO at the time of application submission to be considered eligible** as a U.S. PVO under this RFA.

To register with USAID as a U.S. PVO, please refer to USAID's website at www.usaid.gov, USAID Keyword: PVO Registration, or http://www.usaid.gov/our_work/cross-cutting_programs/private_voluntary_cooperation/regresources.html for complete information and guidance.

2. U.S. NGOs

Other U.S. NGOs that do not meet the definition of a U.S. PVO are eligible to apply for funding but only under the New Partner Category of this RFA.

B. Financial Restrictions for the New Partner Category: Only U.S. PVOs and NGOs that have been awarded no more than \$5 million in total, direct U.S. Government funding over the five fiscal years prior to the due date for submission of an application under this RFA are eligible to apply under the New Partner Category. The \$5 million eligibility limitation does not include: 1) U.S. Government emergency and disaster assistance, whether domestic or international, or 2) U.S. Government domestic or international funding received by virtue of a subcontract or sub-grant. The \$5 million eligibility limitation applies not only to the principal applicant, but also to any organization with which the principal applicant may choose to enter into a subcontract or grant.

C. 25% Cost Share: Each organization must propose to contribute at least 25% of the cost of the proposed project in non-U.S. Government resources, in cash or in-kind. **U.S Government resources of any type or source do not count toward the applicant's cost share contribution for the CSHGP.**

D. Documented Legal Presence: Each organization must have legal presence in the country where the CSHGP project is proposed. This should be documented by a signed agreement with the host government and included in the application. Letters of support from the Ministry of Health, or a

legal document recognizing a local partner may not be submitted in lieu of the PVO/NGO agreement with the local government.

E. Five Years of Experience: Applicants in the Innovation and TB categories must have five years of experience implementing health programs in a developing country. Previous health program experience in the target country, however, is not required.

F. Eligible Country: Proposed project must be in a single eligible country. See the list of Eligible Countries provided in Section A: Program Description.

G. Application Submission Limitations: An eligible applicant may submit up to **two** applications in response to this RFA; however, one of these two applications must be submitted under the TB funding category. Only one application under the TB category may be submitted per organization. In addition, an applicant may have no more than **five** (5) cooperative agreement awards with the CSHGP as of October 1, 2009.

H. Level of Effort (LOE) Restrictions: An HIV/AIDS intervention may be proposed **up to a 30% LOE** under the New Partner and Innovation funding categories (i.e. 35% LOE for HIV/AIDS would be deemed ineligible). TB interventions may **only** be proposed under the TB Category. For all intervention areas, including HIV/AIDS, the LOE proposed is an estimate determined by the applicant. The CSHGP expects that the value proposed reflects the applicant's best estimate of the amount of time and resources that will be required for the proposed activities per intervention area over the life of the project.

I. Page Limitations: Technical applications with more than 30 pages will not be reviewed. This page limit restriction for the body of the technical application does not include attachments, preliminary matter (title page, table of contents, acronym list), or project screening form. [Technical attachments cannot exceed 35 pages in length.]

II. Project Requirements

All proposed projects must address the following components in their application.

A. Local Partner: The applicant must work in partnership with local government, local community- and faith-based organizations (C/FBO), networks of C/FBOs, local academic or research institutions, or other local organizations on the implementation of the program. All applications must be prepared in collaboration with the project partners in the proposed site or country.

B. Key Personnel: The following positions must be included as key personnel in the applications and require USAID approval upon grant award:

1. Child Survival Headquarters Technical Backstop: Assign at least one public health professional at the applicant organization's U.S. headquarters to be responsible for CSHGP activities.

2. Field Project Manager: Assign to the project, one full-time staff person, devoted to the proposed project at 100% LOE, with substantial and appropriate experience in implementing community health or child survival programs.

3. Midterm and Final Evaluation Consultants: External consultants to lead Midterm and Final Evaluations. (Candidates and scopes of work for these consultants do *not* need to be included in the application submission.)

C. Reporting Requirements: The following are reporting requirements for CSHGP grantees:

1. Detailed Implementation Plan (DIP): to be submitted in April 2010 per CSHGP reporting guidelines. The DIP is a requirement for all grantees. Grantees must complete an in-depth assessment and analysis of the current health situation in the program site through qualitative and quantitative baseline surveys. Grantees must establish strong partnerships with local counterparts and jointly prepare the DIP for submission to USAID for approval. New Partner grantees are also required to conduct an organizational assessment as part of the DIP process, and Innovation grantees must submit operations research (OR) concept papers.

2. Annual Reports, including the Midterm Evaluation Report: to be submitted within 30 days after the project year per CSHGP reporting guidelines.

3. Final Evaluation Report: to be submitted within 60 days after the expiration or termination of the award per CSHGP reporting guidelines.

D. Substantial Involvement: Substantial involvement during the implementation of the program will be limited to approval of the elements listed below:

1. Approval of the DIP, submitted to USAID/GH/HIDN, and any subsequent revisions. GH/HIDN staff and technical specialists will review the DIP and meet with the recipient to discuss strengths and weaknesses. The DIP will provide a plan for the program, including plans for baseline and final surveys and collection of required indicators. Substantial changes resulting in any revisions to specific activities, locations, beneficiary population, international training costs, international travel, indirect cost elements, or the procurement plan may require a formal modification to the Agreement by the Agreement Officer. The approved DIP will supplement the initial Program Description in the Agreement and form part of the official documentation.

2. Approval of key personnel to include the following positions:

Headquarters Technical Backstop
Field Program Manager
Midterm Evaluation Team Leader
Final Evaluation Team Leader

3. USAID involvement in monitoring progress toward the achievement of program objectives during the performance of the program, including written guidelines for the content of annual reports, and mid-term and final evaluations in accordance with 22 CFR 226.51.

III. Project Restrictions

Projects may be deemed ineligible if the review panel determines that the application proposes any of the following restricted activities.

A. USAID funding for directly supporting income generation or literacy training activities. All proposed activities must directly contribute to child survival and health outcomes. GH/HIDN realizes that some income generation and literacy training activities may be critical to achieving project objectives and would support these activities if funded under the grantee's cost share.

B. Applications for which the main purpose is: research; equipping hospitals, orphanages, or other residential facilities; curative care in hospitals; surgical procedures and prosthetics; construction; manufacturing of pharmaceuticals, or other health aids; evacuation of children to the U.S. for medical treatment; emergency relief activities; or adoptions. These activities are beyond the scope of the CSHGP.

C. Please review the USAID Eligibility Rules for Goods and Services in the Standard Provisions, Section E for a list of goods and services restricted from purchase with USAID funding.

D. GH/HIDN will **NOT** review applications that are otherwise beyond the scope of the CSHGP as determined by USAID.

IV. Evaluation Criteria

The technical applications will be evaluated in accordance with the Technical Evaluation Criteria set forth at the conclusion of the technical guidelines under each grant funding category. The cost application of all applicants submitting a technically acceptable application will be evaluated by the Agreement Officer to determine if costs are reasonable, allowable, and allocable. If an application is recommended for award following the technical review, cost negotiations will be conducted.

Applicants should note that the technical evaluation criteria serve to: (a) identify the significant issues which applicants should address in their applications; and (b) set the standard against which all applications will be evaluated. **To facilitate the review of applications, applicants should organize the narrative sections of their applications in the same order as the evaluation criteria.** Awards will be recommended based on the ranking of applications according to the technical evaluation criteria and the quality of the response to these criteria.

SECTION C: GRANT APPLICATION GUIDELINES

I. Instructions for Preparation and Submission of Applications

Please read the entire RFA. Respond to criteria as appropriate, including attachments where requested. Depending on the funding category the applicant is applying for, requirements may vary. It is incumbent on the applicants to ensure that they respond specifically to criteria/questions relating to the relevant funding category.

1. Follow the formatting instructions below. Applications that do not follow the instructions will not be reviewed favorably.

All applications should be typed on standard, letter-sized paper (8 ½" x 11"). All applicants should submit a maximum 30-page technical application, including a **one-page Executive Summary and no more than 29 numbered pages** to respond to the evaluation criteria for New Partner, Innovation, and TB categories. Technical applications with more than **30 pages will NOT be reviewed**. This page number restriction does not include attachments, preliminary matter (title page, table of contents, acronym list) or project screening form.

All **Technical Attachments** should be 35 pages or less. All Technical Attachments should be clearly marked, included at the end of the application, and listed in the table of contents. All attachments and/or supplementary documents must be in English or accompanied by an English translation. Supplementary documents in a foreign language do not count as part of the page limit for attachments. Technical Attachments must also be presented on standard, letter-sized paper (8 ½" x 11").

Cost Application Attachments have no page limit. All Cost Application attachments should be clearly marked and listed in the table of contents. Cost Application attachments should follow the technical application and technical attachments in page number order. Cost Application attachments must also be presented on standard, letter-sized paper (8 ½" x 11").

Type face/characters for applications and attachments must be no smaller than 12-point font using fixed pitch spacing per inch with one inch margins. There are two exceptions to the aforementioned instruction: 1) budgets may be in a slightly smaller font (10 point) with smaller margins, and 2) tables may use smaller fonts and margins, but must be easily readable.

2. An **Application Screening Form** is provided in Annex E for completion and submission on the **cover** of the application.

3. The application package must include: **one** electronic version on CD in Microsoft Word 2000 (or later versions) for the technical application and Microsoft Excel 2000 (or later versions) for the budget information, and; **three unbound double-sided** copies of the application, each with a complete set of attachments. Please do not use dividers to separate sections of the application. Please be sure to provide all parts of the application, including attachments and all budget information, in the electronic version.

4. Applicants should retain for their records one copy of the application and all enclosures which accompany their application. Erasures or other changes must be initialed by the person signing the application.

5. To facilitate the competitive review of the applications, USAID will consider only applications conforming to the format prescribed below and under the Technical and Cost Application sections.

6. The title page of the application should include:

- The **name and address of the PVO/NGO applicant;**
- The **RFA number**
- The **category** for the application submission
- The **country** for which the project is proposed.

7. The body of the application should respond to each of the evaluation criteria for the particular application category.

8. Technical Attachments (cannot exceed 35 pages) can consist of:

- Legal Authorization to Operate in Target Country
- Map of Program Area
- Training Plan
- Letters of Support
- Mission Results Framework (if available)
- Memoranda of Understanding (if applicable)
- Program Matrix (Monitoring and Evaluation Table)
- CVs and/or Job Descriptions
- Management/Human Resource Table
- Work Plan
- Organizational Chart and Project Organigram

The organizational chart should illustrate how the project will be managed by the applicant at both the headquarters and field level. The organigram should be a broader picture of the working relationship between all principal partners involved in project implementation.

9. Cost Application Attachments (no page limit) can consist of:

- Standard Form 424 and/or 424A
- Detailed Budget and Budget Narrative
- Procurement Plan
- Certifications
- List of Federally Funded Contracts and Assistance (if applicable)
- Current Negotiated Indirect Cost Rate Agreement

10. Submit the application package on or before to one of the following addresses:

U.S. Postal Service Mailing Address:

USAID/M/OAA Room 7.09-92
Ronald Reagan Building
U.S. Agency for International Development
1300 Pennsylvania Avenue, NW
Washington, DC 20523-3100
Attention: Mr. Ousmane Faye, Jr.

All Other Means of Delivery:

Attn: USAID/M/OAA Room 7.09-92
Ronald Reagan Building
U.S. Agency for International Development
1300 Pennsylvania Avenue, NW
Washington, DC 20004-3100
Please use phone at visitor's desk to contact:
Mr. Ousmane Faye, Jr., at x2-0832.

11. Send an exact copy of the complete application to the USAID Mission in the country of the proposed program by close of business on **February 24, 2009**. It is the responsibility of the Applicant to ensure that the USAID Mission receives a copy of the complete application. See Annex D for the current Mission addresses.

12. All applications received by the deadline will be reviewed for responsiveness to the specifications outlined in these guidelines and the application format. Sections B and C address the selection criteria, the technical evaluation criteria, and procedures for the applications. The specific evaluation criteria for each category are found at the end of the category descriptions. **Applications which are submitted late or are incomplete will not be considered in the review process.**

II. Technical Application Guidelines

Guidelines for each of the three funding categories are provided in this section. Applicants should read the guidance thoroughly for the specific funding category under which they intend to apply, taking note of the category description, funding levels, and duration, as well as the technical guidelines and evaluation criteria. Technical Application Guidelines for the following funding categories are as follows:

- A. New Partner Category
- B. Innovation Category
- C. Tuberculosis Category

II.A. Guidelines for New Partner Category

(Four or five years, up to \$1.5 million)

Category Purpose and Scope: This category supports new partner organizations and their local partners to implement innovative and effective MNCH projects. New partners are expected to design, implement, monitor, and evaluate innovative and effective projects that can be replicated and contribute to the development of local capacity to address relevant child survival and health issues. In addition, new partners contribute to the CSHGP portfolio by introducing new, underused, and high impact MNCH interventions through implementation of innovative community oriented delivery strategies.

CSHGP reporting requirements (e.g. KPC surveys, annual reports, external Midterm and Final evaluations) and any additional proposed process documentation will generate data and lessons for key stakeholders during the course of the project cycle regarding the effectiveness and potential for replicating innovative, community oriented delivery strategies. Additional assessments, such as the Rapid Health Facility Assessment (RHFA) or the Sustainability Assessment, though not required, are encouraged if appropriate and relevant to the applicant and proposed programming as a means of generating additional data and lessons.

Innovation is defined as a strategy, approach, or methodology that introduces novel ways to solve the major challenges of delivering high impact interventions to vulnerable populations and strengthening health systems, ultimately leading to increased scale of these interventions and improved health outcomes. Innovative approaches often require challenging existing paradigms in order to address an identified and acute need at national and global levels.

Applicants will need to integrate the innovation in the context of an effective project strategy, and in coordination with USAID and national programs in-country. Applicants should propose a single innovation or a cohesive model of innovation that can include the following:

- Introduction of a new approach;
- Substantial transformation of an existing approach; and/or
- Adaptation of a successful approach for a different context.

Budget Requests: New Partner Category applicants may submit budget requests for four or five year projects for up to \$1.5 million.

Who Should Apply: Only U.S. PVOs and NGOs that have been awarded no more than \$5 million in total, direct U.S. Government funding over the five fiscal years prior to submission of an application under this RFA are eligible to apply under the New Partner Category. Under this RFA, the restrictions for U.S. Government funding for New Partner Category applicants does not include: 1) U.S. Government emergency and disaster assistance, whether domestic or international, or 2) U.S. Government domestic or international funding received by virtue of a subcontract or sub-grant. The \$5 million eligibility limitation applies not only to the principal applicant, but to any organization with which the principal applicant may choose to enter into a subcontract or grant. All

interested applicants must meet the eligibility, organizational and project requirements identified in the Selection Criteria Section of the RFA.

Technical Intervention Restrictions:

Tuberculosis interventions may **not** be proposed under the New Partner Category.
HIV/AIDS interventions may be proposed **up to a 30% level of effort**.

Additional Resources: Visit the New Partner Portal at http://www.childsurvival.com/new_partner/ for more information.

Technical Guidance for New Partner Applications

Applicants must follow the format and guidance described below to prepare a New Partner Category application in response to this RFA.

1. Executive Summary

This section should be a succinct summary and **must** contain the following information as applicable and any additional information the Applicant believes necessary to best represent its proposed program.

❖ Guidance:

- Problem statement, including rationale for the proposed project
- Description of project goals, objectives, and key strategies (including estimated LOE devoted to each technical intervention), and project location
- Description of innovative component(s) of delivery strategies and capacity to address key barriers to improving health outcomes and strengthening health systems
- Estimated number of total population and beneficiaries, including children under five and women of reproductive age
- Local partners involved in project implementation, including name and type of any sub-grantees and total level of USAID funding to be sub-granted
- Level of USAID funding requested for the project and cost-share amount
- Application category
- Proposed start/end dates
- Main authors of the proposal and proposal contact at U.S. headquarters office

2. Project Context

This section of the application presents an overview of the context in which the proposed project will operate. It should provide a clear picture of the health context in the selected project area to serve as the basis for the selection of interventions, strategies, and key project partners.

❖ Guidance:

- Provide an overview of the current health status of the target population by citing the leading causes of under-five morbidity and mortality and maternal morbidity and mortality. Please

cite sources of data, such as qualitative data; data from secondary sources like the Demographic and Health Survey (DHS), USAID MCH Initiative,⁶ Countdown to 2015 Country Profiles,⁷ or other data collected by an organization other than the applicant.

- Provide relevant information on pertinent care-seeking practices and household-community-level behaviors. The applicant is not expected to have conducted qualitative research or a survey, but general knowledge of the local population should be evident. Include a discussion of characteristics that have an impact on the health status of the population (e.g. socioeconomic status, religion, gender, ethnicity, literacy, etc.).
- Provide an overview of the current status of health care services in the project site, detailing the quality, equity, and utilization of these existing services. Include both formal and informal health services (e.g. care provided by the MOH, private sector, NGOs/PVOs, and traditional health providers). This information may draw upon qualitative and/or quantitative information.
- Describe existing national policies and strategies in place related to the proposed programming (both technical and cross-cutting intervention areas). Discuss how the proposed strategy is or is not consistent with official MOH policies and/or strategies. This can be done in table or narrative format. Provide an explanation of, and justification for, any proposed approach that differs from the MOH policy in the proposed country.
- Describe relevant programs that the organization and/or other agencies are implementing in the same geographic area to ensure there is no duplication of effort. Indicate how the proposed project will engage and/or complement existing programs. This includes a discussion of relevant programming of the USAID Mission, proposed local partner, and global initiatives.
- Briefly describe the location of the proposed program and provide a map(s) with scale in an **attachment**.
- Estimate the total population, breaking out children under five years of age and women of reproductive age (15-49 years) living in the program site. Estimate the number of villages or other community units that are in the target area. Please refer to Annex F for beneficiary calculation guidelines. Please cite the sources of data.

3. Innovation

The Applicant must identify and explain the innovative components of the project strategy that will contribute to addressing critical bottlenecks in delivery and discuss their relevance for programming and/or policy. **The innovation(s) should be highlighted separately, but integrated within the context of an effective project strategy.**

⁶ http://www.usaid.gov/our_work/global_health/mch/publications/mch_report.html

⁷ <http://www.countdown2015mnch.org/>

❖ Guidance:

- Provide a clear and focused description of the innovation. Include a strong rationale for the capacity of the innovation to address critical delivery challenges and strengthen health systems and discuss the program and/or policy relevance of the proposed innovation. Discuss the process for identifying the innovation and eliciting buy-in from local stakeholders for the proposed activities.
- Describe the mechanism for tracking the project's innovation. Include existing project reporting requirements and any additional process documentation as relevant.
- Describe plans to share project data and lessons with key stakeholders about the potential for replicating and scaling up innovative components of delivery strategies. This should include sharing lessons within the organization, throughout the PVO/NGO community, and relevant in country stakeholders.

4. Project Strategy

This section provides a clear picture of the proposed project strategy and implementation plan. Details on the proposed technical interventions and corresponding activities should be included.

❖ Guidance:

- Provide the goal and supporting objectives of the proposed project. Demonstrate how selected interventions and strategies support stated goals and objectives.
- Include a discussion of the decision-making process for the selected approach, articulating a strong rationale. The rationale should be linked to the project context section and should demonstrate an understanding of the population and epidemiology. It should clearly explain why the proposed strategies and approaches are appropriate for the context.
- Describe the project strategy and how it contributes to national policies and strategies. Include a discussion on the increase in demand for and improvements in quality, access, and equity of services improvements in quality, access, and equity that the project anticipates through activities at the individual, household, community, and facility levels. Please address the following components of the overall strategy, as applicable:
 - Behavior change communication (e.g. proposed modes of message delivery, important actors in message delivery);
 - Community mobilization approach (e.g. utilization of community development committees, role of key community actors);
 - Linkages between the community and the facility (e.g. referrals, transportation schemes, community-based insurance schemes, community role in quality improvement);
 - Facility-level activities (e.g. Health Management Information Systems (HMIS) strengthening, health provider training, diagnostic quality, improved supervision).

- Discuss the approach to each of the selected technical intervention areas by outlining proposed activities to address each intervention. Include key messages that will be promoted through the aforementioned behavior change communication and community mobilization approaches. Also, note how the different interventions and activities will be integrated.
- As an **attachment**, please present a brief, one to two page work plan in a table format which reflects the overall project approach, objectives, timeline, and budget. Also, present the project training activities/plan in table format for each intervention with a brief description of the training objective, number of participants, and timing of training as an **attachment**. Note that the work plan should cover all years of project implementation.

5. Partnerships

This section describes the proposed project's relationships with the USAID Mission in country, the national MOH, and other national/international stakeholders. Adherence to national policies/strategies and global initiatives should be clearly stated.

❖ Guidance:

- Demonstrate how the proposed project will complement and/or catalyze relevant USAID Mission bilateral delivery strategies, national strategies, and global initiatives.
- Demonstrate how the project will communicate with and incorporate input from the USAID Mission and key partners throughout project implementation.
- Describe the organization's operations, current agreements, and working relationships with the host country government and other organizations within the country proposed in this application. Documentation of current legal authorization for the U.S. PVO/NGO or its international affiliate to operate in the host country must be provided in an **attachment**.
- Describe relevant and strategic local partnerships for disseminating lessons-learned and/or conducting policy advocacy activities.
- Describe the local partner's role and responsibilities in the proposed project and technical intervention areas. Discuss the approach the project will take to build the capacity of the local partner. Provide objectives and indicators for capacity building and sustainability in the local partner.
- In an **attachment**, include a letter showing specific support for the proposed program from each of the cooperating governmental and/or other organizations with which the program will establish a formal relationship (e.g. MOH, local partner(s), other NGOs). Each letter must be dated within three months of the application submission and should include the name of the person with whom the applicant discussed the proposed project. Letters of

support from the MOH should also demonstrate that the MOH agrees with the proposed PVO/NGO approach.

6. Organizational Capacity and Development

This section provides evidence that the applicant has the ability to carry out a successful project and describes how new applicants will use this grant to strengthen the institutional capacity of the applicant organization. See TRMs (http://www.childsurvival.com/documents/trms/update_trms.cfm) for information and resources on organizational development and capacity building. Also, an assessment of the applicant's organizational capacity will be required for New Partner grantees as part of the DIP process.

❖ Guidance:

- Describe the U.S. PVO/NGO applicant – including its general purpose, mission statement, goals, annual budget (including funding sources), major work and main methods of operation.
- Discuss the organization's experience in designing, implementing, monitoring and evaluating international, community-level projects, specifically organizational successes in the proposed intervention areas and approaches.
- In the **attachments**, please provide an organizational chart that clearly delineates the key personnel responsible for technically backstopping this program in the PVO/NGO U.S. headquarters office and managing this program in the in-country office. Describe how they fit into the overall organization and the linkages between the headquarters, regional (if applicable) and field program personnel. **The organizational chart should illustrate how the project will be managed by the applicant at both the headquarters and field level.**
- Describe the proposed management structure for this program and provide a project organigram in the **attachments**. **The organigram should be a broad picture of the working relationship between all principal partners involved in project implementation.** Include in the narrative a description of the responsibilities of all principal organizations and staff involved, reporting relationships, authority and lines of communication within and between each of these organizations. Please include job descriptions of primary staff and CVs, if available (e.g. headquarters technical backstop, training manager, M&E manager, field program manager) as **attachments**.
- Discuss the roles and responsibilities of project staff vis-à-vis budgeting, monitoring, and reporting on the financial status of the project, to ensure accountability in the use of U.S. Government and matching funds.

In the **attachments**, please provide a table of all individuals who will contribute to achieving the results of the program. This may include, but is not limited to: PVO/NGO headquarters and field staff, local partner staff, MOH staff, community health workers, and private sector providers. For each type of worker provide: 1) the number of workers in that

category, 2) organizational affiliation, 3) main responsibilities, 4) percent of effort devoted to project activities, and 5) entity responsible for remunerating the worker (e.g. PVO/NGO, MOH, community, volunteers), 6) brief description of the role the individual will play within the project. This table should reflect the budget.

- Identify specific organizational development needs to be addressed by the applicant in order to strengthen its ability to carry out this project. Describe how these needs were determined. Reference any institutional assessments the organization may have already carried out, and/or those it plans to carry out.
- Outline activities the applicant will use to address organizational development needs, and discuss the growth the project anticipates as a result of these activities. Propose monitoring plans and corresponding indicators to measure progress towards organizational development; these should be incorporated into the monitoring and evaluation plan/matrix.

7. Monitoring and Evaluation

This section outlines the project's plans for tracking and monitoring key project indicators.

❖ Guidance:

- Describe the types of baseline assessments, studies, or surveys that will be carried out. Include baseline organizational assessments of PVO/NGO and local partner capacity, health facility assessments, qualitative and population-based assessments (e.g. KPC). This information must also be reflected in the budget.
- Please refer to the guidance provided for the innovation (Section 3) and include relevant information in this section regarding the process for describing and tracking the innovation. The innovation should be integrated in the project's overall monitoring and evaluation approach and project reporting requirements.
- Describe the current data collection systems that already exist in the project area, how/if the project's data collection will complement or be different from the existing system, and how they will link to each other.
- As an **attachment**, include a monitoring and evaluation table that outlines all the proposed project indicators that are linked to specific project objectives. This would include indicators related to technical intervention outcomes and process indicators used to track project progress for training plans and organizational development. The table should include the source of the data (e.g. KPC, DHS, MOH, CHWs) and the proposed frequency of collection. To the extent possible, the indicators should be globally-accepted, standard indicators and feed into the USAID reporting system.

Technical Evaluation Criteria for New Partner Applications:

All sub-criteria are weighted equally.

Executive Summary – 1 page maximum (1 point)

- Clear and concise overview of the proposed project that includes all elements listed in the Executive Summary guidelines.

Project Context (10 points)

- Technically sound, appropriate, and comprehensive presentation of data related to the leading causes of mortality and morbidity of selected population, drawing upon available, and up-to-date national and sub-national level data from reputable sources.
- Discussion of relevant care-seeking practices, household-/community-level behaviors, and characteristics that impact the health status of the target population.
- Discussion of the quality, equity, and utilization of the existing health care services, both formal and informal, public and private.
- Discussion of existing national policies and strategies in place related to the proposed programming (both technical and cross-cutting intervention areas). (Applicant should demonstrate consistency with these existing policies and strategies or provide a strong rationale for any proposed approach that differs from the MOH policy).
- Description of relevant programming in the project area, as well as at the national level, such as other programming done by the applicant and the local partner, as well as programming of other NGOs, USAID Missions, and global initiatives. (Applicant should indicate how the proposed project will engage and/or complement these existing programs).

Innovation (15 points)

- Clear and focused description of the innovation; strong rationale for the capacity of the innovation to address critical delivery challenges and strengthen health systems.
- Clear description of process for tracking the innovation.
- Clear description of plans to share project data and lessons with key stakeholders about potential for replicating and scaling-up innovative components of delivery strategies.

Project Strategy (25 points)

- Goals and objectives are appropriate and reasonable for the proposed project. Selected strategies and interventions clearly support stated goals and objectives.
- Clear rationale for the project design including the chosen strategies/approaches, technical interventions, selected population, selected geographic area, chosen levels of implementation (i.e. household, community, facility, and/or policy), selection of implementing partner(s), and chosen delivery modalities.
- Clear and technically sound description of overall project strategy that addresses quality, access, and equity at the individual, household, community, and facility levels.
- Clear and comprehensive description of how the proposed project will address selected technical intervention areas.
- Proposed workplan reflects the project goal, objectives, activities, and budget.

Partnerships (15 points)

- Demonstration of plans to communicate project activities and key results with Mission.
- Relevant and strategic local partnerships are identified for sharing project learning and/or conducting policy advocacy activities.
- Clear description of the roles of local partners is provided, including how the project plans to build capacity of these local partners.
- Letters of support provided that clearly demonstrate partners' understanding of their role in the proposed project (note: letter from USAID Mission is not required).

Organizational Capacity and Development (19 points)

- Organization has demonstrated adequate capacity to implement the proposed project and activities through discussion of past relevant programming experience.
- Proposed project human resources correspond to and are appropriate for the proposed activities.
- Roles and responsibilities of key project staff are clear.
- Applicant clearly identifies its organizational needs to implement the proposed project.
- Applicant clearly outlines a plan with specific activities to address these organizational needs and indicators for assessing progress toward organizational development.

Monitoring and Evaluation (15 Points)

- Proposed project indicators are globally accepted and are appropriate to adequately assess proposed programming. In addition, the proposed plan to monitor these indicators is feasible.
- Process to collect, assess, and use data in management of project is clearly articulated and feasible.
- Proposed project's data collection system complements and strengthens the MOH health management and information system.
- Baseline, midterm, and final assessments are planned and budgeted for.

II.B. Guidelines for Innovation Category

(Four or five years, up to \$1.75 million)

Category Purpose and Scope:

The Innovation Category places the primary emphasis on introducing and transferring new ideas to improve the delivery of high impact MNCH interventions in community oriented projects in diverse community settings (e.g. urban, rural, post conflict). Innovation is the most critical component of the proposed programming. Innovation Category projects are expected to contribute to the existing evidence base, both at the national and global levels, and to be catalytic in facilitating the uptake of successful innovations into national policies and/or programs.

Applicants must provide a strong rationale for the proposed innovation, including its contribution to solving relevant public health issues and influencing national policies and strategies. Applicants must present the existing evidence base for the innovation and pose the research questions that will address the identified problem(s). In addition to project documentation requirements, applicants are expected to conduct OR to generate credible evidence and lessons for national and global stakeholders (e.g. feasibility, cost effectiveness, and potential for replication and scale up of the proposed innovation). Applicants are encouraged to establish partnerships with local research institutions for quality data collection and analysis, as necessary.

Innovation is defined as a strategy, approach, or methodology that introduces novel ways to solve the major challenges of delivering high impact interventions to vulnerable populations and strengthening health systems, ultimately leading to increased scale of these interventions and improved health outcomes. Innovative approaches often require challenging existing paradigms in order to address an identified and acute need at national and global levels.

Applicants will need to integrate the innovation in the context of an effective project strategy, and in coordination with USAID and national programs in-country. Applicants should propose a single innovation or a cohesive model of innovation that can include the following:

- Introduction of a new approach;
- Substantial transformation of an existing approach; and/or
- Adaptation of a successful approach for a different context.

Budget Requests: Innovation Category applicants may submit budget requests for four or five year projects for up to \$1.75 million. Applicants may budget up to \$200,000 for Operations Research.

Who Should Apply: U.S. PVOs who meet the eligibility, organizational, and program requirements identified in the Selection Criteria Section of the RFA. The Innovation Category is a highly competitive funding category, requiring substantial leadership and experience in child survival and health interventions. Successful applicants demonstrate a strong ability to implement and replicate innovative and effective projects and set higher standards for both their organizations and the PVO/NGO community.

Technical Intervention Restrictions:

- Tuberculosis interventions may **not** be proposed under the Innovation Category;
- HIV/AIDS may be proposed at **up to a 30% level of effort**

Technical Guidance for Innovation Applications

Applicants must follow the format and guidance described below to prepare an Innovation Category application in response to this RFA.

1. Executive Summary

This section should be a succinct summary and **must** contain the following information as applicable and any additional information the Applicant believes necessary to best represent its proposed program.

❖ **Guidance:**

- Problem statement, including rationale for the proposed project
- Description of project goals, objectives, and key strategies (including percentage (%) estimated LOE devoted to each technical intervention), and project location
- Highlight why the proposed innovation is critical to addressing key barriers to improving health outcomes and its capacity to strengthen the health system and to contribute to national policy and/or strategy direction.
- Proposed method(s) for evaluating the innovation
- Estimated number of total population and beneficiaries, including children under five and women of reproductive age (see beneficiary calculation guidelines in Annex F)
- Local partners involved in project implementation, including name and type of any sub-grantees and total level of USAID funding to be sub-granted
- Level of USAID funding requested for the project and cost-share amount
- Application category
- Proposed start/end dates
- Main authors of the application and application contact at U.S. headquarters office

2. Project Context

This section of the application presents an overview of the context in which the proposed project will operate. It should provide a clear picture of the health context in the selected project area to serve as the basis for the selection of interventions, strategies, and key project partners.

❖ **Guidance:**

- Provide an overview of the current health status of the target population by citing the leading causes of under-five morbidity and mortality and maternal morbidity and mortality. Please cite sources of data, such as qualitative data; data from secondary sources like the

Demographic and Health Survey (DHS), USAID MCH Initiative,⁸ Countdown to 2015 Country Profiles,⁹ or other data collected by an organization other than the applicant.

- Provide relevant information on pertinent care-seeking practices and household-community-level behaviors. The applicant is not expected to have conducted qualitative research or a survey, but general knowledge of the local population should be evident. Include a discussion of characteristics that have an impact on the health status of the population (e.g. socioeconomic status, religion, gender, ethnicity, literacy, etc.).
- Provide an overview of the current status of health care services in the project site, detailing the quality, equity, and utilization of these existing services. Include both formal and informal health services (e.g. care provided by the MOH, private sector, NGOs/PVOs, and traditional health providers). This information may draw upon qualitative and/or quantitative information.
- Describe existing national policies and strategies in place related to the proposed programming (both technical and cross-cutting intervention areas). Discuss how the proposed strategy is or is not consistent with official MOH policies and/or strategies. This can be done in table or narrative format. Provide an explanation of, and justification for, any proposed approach that differs from the MOH policy in the proposed country.
- Describe relevant programs that the organization and/or other agencies are implementing in the same geographic area to ensure there is no duplication of effort. Indicate how the proposed project will engage and/or complement existing programs. This includes a discussion of relevant programming of the USAID Mission, proposed local partner, and global initiatives.
- Briefly describe the location of the proposed program and provide a map(s) with scale in an **attachment**.
- Estimate the total population, breaking out children under five years of age and women of reproductive age (15-49 years) living in the program site. Estimate the number of villages or other community units that are in the target area. Please refer to **Annex F** for beneficiary calculation guidelines. Please cite the sources of data.

3. Innovation

This section outlines the innovation, the most critical component of proposed programming. Applicants should propose a strategy, approach, or methodology that introduces novel ways to solve the major challenges of delivering interventions to vulnerable populations and strengthens health systems, ultimately leading to increased coverage or scale of high impact interventions and improved health outcomes. **The innovation should be highlighted separately, but integrated within the context of an effective project strategy.**

⁸ http://www.usaid.gov/our_work/global_health/mch/publications/mch_report.html

⁹ <http://www.countdown2015mnch.org/>

❖ Guidance:

- Provide a clear and focused description of the innovation. Include a strong rationale for the capacity of the innovation to address critical delivery challenges and strengthen health systems. Discuss the process for identifying the innovation and eliciting buy-in from local stakeholders for the proposed activities.
- Present the existing evidence base for the innovation. Provide a brief overview of previous attempts to address the identified public health challenge. Explain how the proposed innovation will fill a critical knowledge gap; contribute to the global and/or national evidence base; and further national policies and/or programs.
- Describe the OR proposed to assess the innovation (e.g. feasibility, cost effectiveness, and potential for replication and scale-up) and present an appropriate timeline. Clearly state the research question that will address the identified problem and indicate how it will be answered through a methodologically sound and feasible design for the local context.
- Describe the capacity of the applicant to conduct the proposed OR. If applicable, identify a partner institution that will assist with the research design, data collection, and data analysis, documentation, and dissemination of findings.
- Describe processes that the project will engage in to influence national policy, scale-up, or uptake of the innovation, based on findings. Clearly outline the mechanisms through which the project will share evidence and lessons with relevant key stakeholders to inform uptake, replication, and scale-up of the innovation.

4. Project Strategy

This section provides a clear picture of the proposed project strategy and implementation plan. Details on the proposed technical interventions and corresponding activities should be included.

❖ Guidance:

- Provide the goal and supporting objectives of the proposed project. Demonstrate how selected interventions and strategies support stated goals and objectives.
- Include a discussion of the decision-making process for the selected approach, articulating a strong rationale. The rationale should be linked to the project context section and should demonstrate an understanding of the population and epidemiology. It should clearly explain why the proposed strategies and approaches are appropriate for the context, including:
 - Rationale for selected population (e.g. specific communities, districts, barriers to health);
 - Rationale for selected geographic area (e.g. strategic relevance of the chosen geographic area, particularly in relation to USAID Mission geographic priority areas);

- Rationale for chosen technical intervention package; discuss reasons for omissions and inclusions, particularly if omissions are among the leading causes of morbidity and mortality.
 - Rationale for chosen levels of implementation (e.g. household, community, facility, policy), the role of the implementing partner(s) (e.g. what is the comparative advantage of a partner chosen to fulfill the outlined role) and;
 - Rationale for chosen delivery strategies (e.g. what factors in the community led to the choice of community mobilization approach).
- Describe the project strategy and how it contributes to national policies and strategies. Include a discussion on the increase in demand for and improvements in quality, access, and equity of services that the project anticipates through activities at the individual, household, community, and facility levels. Please address the following components of the overall strategy, as applicable:
 - Behavior change communication (e.g. proposed modes of message delivery, important actors in message delivery);
 - Community mobilization approach (e.g. utilization of community development committees, role of key community actors);
 - Linkages between the community and the facility (e.g. referrals, transportation schemes, community-based insurance schemes, community role in quality improvement);
 - Facility-level activities (e.g. HMIS strengthening, health provider training, diagnostic quality, improved supervision).
 - Discuss the approach to each of the selected technical intervention areas by outlining proposed activities to address each intervention. Include key messages that will be promoted through the aforementioned behavior change communication and community mobilization approaches. Also, note how the different interventions and activities will be integrated.
 - As an **attachment**, please present a brief, one to two page work plan in a table format, which reflects the overall project approach, objectives, timeline, and budget. Also, present the project training activities/plan in table format for each intervention with a brief description of the training objective, number of participants, and timing of training as an **attachment**. Note that the work plan should cover all years of project implementation.

5. Partnerships

This section describes the proposed project's relationships with the USAID Mission in country, the national MOH, and other national/international stakeholders. Adherence to national policies/strategies and global initiatives should be clearly stated.

❖ Guidance:

- Demonstrate how the proposed project will complement and/or catalyze relevant USAID Mission bilateral delivery strategies, national strategies, and global initiatives.

- Demonstrate how the project will communicate with and incorporate input from the USAID Mission and key partners throughout project implementation.
- Describe the organization's operations, current agreements, and working relationships with the host country government and other organizations within the country proposed in this application. Documentation of current legal authorization for the U.S. PVO or its international affiliate to operate in the host country must be provided in an **attachment**.
- Describe relevant and strategic local partnerships for disseminating lessons-learned and/or conducting policy advocacy activities.
- Describe the local partner's role and responsibilities in the proposed project and technical intervention areas. Discuss the approach the project will take to build the capacity of the local partner. Provide objectives and indicators for capacity-building and sustainability in the local partner.
- In an **attachment**, include a letter showing specific support for the proposed project from each of the cooperating governmental and/or other organizations with which the project will establish a formal relationship. Each letter must be dated within three months of the application submission. The letter must outline the specific role in the proposed project of each of the cooperating governmental and/or other organizations with which the project will establish a formal relationship. In addition, the letter from the MOH must demonstrate that the MOH agrees with the proposed PVO/NGO approach. Please include references to proposed innovation activities, as relevant.

6. Organizational Capacity

This section of the application provides information about the applicant. This section provides evidence that the applicant has the ability to carry out a successful project.

❖ Guidance:

- Describe the U.S. PVO applicant – including its general purpose, mission statement, goals, annual budget (including funding sources), major work and main methods of operation.
- Discuss the organization's experience in designing, implementing, monitoring and evaluating international, community-level projects, specifically organizational successes in the proposed intervention areas and approaches.
- In the **attachments**, please provide an organizational chart that clearly delineates the key personnel responsible for technically backstopping this project in the PVO/NGO U.S. headquarters office and managing this project in the in-country office. Describe how they fit into the overall organization and the linkages between the headquarters, regional (if applicable) and field project personnel. **The organizational chart should illustrate how the project will be managed by the applicant at both the headquarters and field level.**

- Describe the proposed management structure for this project and provide a project organigram in the **attachments**. **The organigram should be a broad picture of the working relationship between all principal partners involved in project implementation.** Include in the narrative a description of the responsibilities of all principal organizations and staff involved, reporting relationships, authority and lines of communication within and between each of these organizations. Please include job descriptions of primary staff and CVs if available (e.g., headquarters technical backstop, training manager, M&E manager, field project manager) as **attachments**.
- Discuss the roles and responsibilities of project staff related to budgeting, monitoring, and reporting on the financial status of the project, to ensure accountability in the use of U.S. Government and matching funds.
- In the **attachments**, please provide a table of all individuals who will contribute to achieving the results of the project. This may include, but is not limited to: PVO/NGO headquarters and field staff, local partner staff, MOH staff, community health workers and private sector providers. For each type of worker provide: 1) the number of workers in that category; 2) organizational affiliation; 3) main responsibilities; 4) percent of effort devoted to project activities; and 5) entity responsible for remunerating the worker (e.g., the PVO/NGO, MOH, community, volunteer); 6) brief description of the role the individual will play within the project. This table should reflect the budget.

7. Monitoring and Evaluation

This section outlines the project's plans for tracking and monitoring key project indicators and includes relevant references to activities to evaluate the innovation.

❖ Guidance:

- Describe the types of baseline assessments, studies, or surveys that will be carried out. Include baseline organizational assessments of PVO/NGO and local partner capacity, health facility assessments, qualitative and population-based assessments (e.g. KPC). This information must also be reflected in the budget.
- Please refer to the guidance provided for evaluating the innovation (Section 3) and include relevant information in this section regarding the methodology for evaluating the innovation and the use of data and lessons generated at the national and global levels, as this should be integrated in the project's overall monitoring and evaluation approach. Applicants may budget up to \$200,000 for Operations Research.
- Describe the current data collection systems that already exist in the project area, how/if the project's data collection will complement or be different from the existing system, and how they will link to each other.

- As an **attachment**, include a monitoring and evaluation table that outlines all the proposed project indicators that are linked to specific project objectives. This would include indicators related to technical intervention outcomes and process indicators used to track project progress for training plans and organizational development. The table should include the source of the data (e.g. KPC, DHS, MOH, CHWs) and the proposed frequency of collection. To the extent possible, the indicators should be globally-accepted, standard indicators and feed into the USAID reporting system.

Technical Evaluation Criteria for Innovation Category Applications:

All sub-criteria are weighted equally.

Executive Summary – 1 page maximum (1 point)

- Clear and concise overview of the proposed project that includes all elements listed in the Executive Summary guidelines.

Project Context (10 points)

- Technically sound, appropriate, and comprehensive presentation of data related to the leading causes of mortality and morbidity of selected population, drawing upon available, and up-to-date national and sub-national level data from reputable sources.
- Discussion of relevant care-seeking practices, household-/community-level behaviors, and characteristics that impact the health status of the target population.
- Discussion of the quality, equity, and utilization of the existing health care services, both formal and informal, public and private.
- Discussion of existing national policies and strategies in place related to the proposed programming (both technical and cross-cutting intervention areas). (Applicant should demonstrate consistency with these existing policies and strategies or provide a strong rationale for any proposed approach that differs from the MOH policy).
- Description of relevant programming in the project area, as well as at the national level, such as other programming done by the applicant and the local partner, as well as programming of other NGOs, USAID Missions, and global initiatives. (Applicant should indicate how the proposed project will engage and/or complement these existing programs).

Innovation (30 points)

- Clear and focused description of the innovation; strong rationale for the capacity of the innovation to address critical delivery challenges and strengthen health systems.
- Demonstration of innovation’s potential contribution to global and/or national evidence base; to furthering national policy, and/or to be taken to scale by national programs.
- Proposed Operations Research (OR) design—including research question(s)—is adequate and appropriate to assess the innovation.
- Clear description of processes that applicant will engage in to influence national policy or national scale of innovation, based on results.
- Appropriate choice of “OR partner” or demonstrated capacity of applicant to conduct OR.

Project Strategy (20 points)

- Goals and objectives are appropriate and reasonable for the proposed project. Selected strategies and interventions clearly support stated goals and objectives.
- Clear rationale for the project design including the chosen strategies/approaches, technical interventions, selected population, selected geographic area, chosen levels of implementation (i.e. household, community, facility, and/or policy), selection of implementing partner(s), and chosen delivery modalities.
- Clear and technically sound description of overall project strategy that addresses quality, access, and equity at the individual, household, community, and facility levels.
- Clear and comprehensive description of how the proposed project will address selected technical intervention areas.
- Proposed workplan reflects the project goal, objectives, activities, and budget.

Partnerships (15 points)

- Demonstration of plans to communicate project activities and key results with Mission.
- Relevant and strategic local partnerships are identified for sharing project learning and/or conducting policy advocacy activities.
- Clear description of the roles of local partners is provided, including how the project plans to build capacity of these local partners.
- Letters of support provided that clearly demonstrate partners' understanding of their role in the proposed project (note: letter from USAID Mission is not required).

Organizational Capacity (9 points)

- Organization has demonstrated adequate capacity to implement the proposed project and activities through discussion of past relevant programming experience.
- Proposed project human resources correspond to and are appropriate for the proposed activities.
- Roles and responsibilities of key project staff are clear.

Monitoring and Evaluation (15 points)

- Proposed project indicators are globally accepted and are appropriate to adequately assess proposed programming. In addition, the proposed plan to monitor these indicators is feasible.
- Process to collect, assess, and use data in management of project is clearly articulated and feasible.
- Proposed project's data collection system complements the MOH health management and strengthens information system.
- Baseline, midterm, and final assessments and OR studies are planned and budgeted for.

II.C. Guidelines for Tuberculosis Category

Five years, up to \$1.5 million

The TB Category has the following objectives:

- To capitalize on the PVO's comparative advantage in community-based approaches for TB programming;
- To build the TB technical capacity of U.S. PVOs who already have some experience working in TB programming;
- To expand the number of community-based partners working in TB; and
- To develop strategies and sustainable models for TB prevention and care through local partnerships.

Category Purpose and Scope: USAID fully supports the World Health Organization's (WHO) Stop TB Strategy as the approach for TB prevention and control through USAID's TB Program element and nine sub-elements (Annex B). All proposals should program according to these sub-elements, but the following sub-elements are most applicable to this program: DOTS Expansion and Enhancement, TB/HIV, and TB Care and Support. Applicants should apply under this category **ONLY** if there is a clearly defined role for the PVO within the context of – and in coordination with – a National TB Control Program's (NTP) Strategic Plan. Given the varied needs at the country level and specific technical expertise required to address each of the elements of the Stop TB Strategy, applicants are encouraged to address only the elements of the Strategy in their proposal that can be supported with the resources available and using the organizational comparative advantage.

Applicants need to clearly identify their contribution to the NTP within the context of the Stop TB Strategy and how other actors are addressing the key elements. PVOs should focus on underperforming areas, hard to reach groups, and technical areas or approaches that are within their organization's comparative advantage. Underperforming areas would be measured based on the case notification and treatment success.

USAID believes that PVOs have a strategic role to play in TB programs. It is critical that applicants weigh their comparative advantage and bring the relevant experience to bear if they propose to work in this area. Some illustrative issues that may be PVOs' comparative advantage to address through this program are the following:

- Improving detection of TB suspects through intensified case finding;
- Reducing diagnostic delay;
- Reducing default rates;
- Improving social mobilization and engaging civil society and local organizations in TB care and prevention;
- Reducing stigma;
- Improving community-based approaches to TB and TB/HIV diagnosis, care and treatment; and
- Improving linkages to other health interventions.

It is also recognized that many PVOs have limited experience working in all the technical components of the Stop TB Strategy and may not be involved in state-of-the-art TB programming and technical issues. If awarded, USAID will ensure that external technical expertise will be available to review and comment on the DIP at key moments in the development process as well as provide the external consultant to serve as the team leader for the participatory Midterm and Final evaluations of the project. This will be from a separate budget, outside of the grant. However, the rest of the evaluation team and all other expenses for conducting the evaluation must be budgeted for in the application. In addition, the proposal does need to present the organization's technical capacity and/or plans to obtain the necessary technical expertise to implement all of the proposed activities for the project and budget appropriately for this expertise.

Under the TB Category, 100% of the LOE is to be devoted to TB and/or TB/HIV care and prevention activities.

Budget Requests: TB Category projects may submit budget requests for five-year projects for up to \$1.5 million.

Who Should Apply: U.S. PVOs who meet the eligibility, organizational and project requirements identified in the Selection Criteria Section of the RFA.

Technical Guidance for Tuberculosis Category Applications

1. Executive Summary

This section should contain the information that the PVO believes best represents its proposed project. It should be no longer than one page.

❖ Guidance:

- Problem statement, including rationale for the proposed project
- Description of project goals, objectives, key strategies (including estimated level of effort devoted to each TB sub-element), and project location
- Estimated number of total population and beneficiaries: provide the total population that will be covered by the intervention as well as the estimated number of TB cases in the geographical area
- Local partner(s) involved in project implementation, including name and type of any subgrantees and total level of USAID funding to be subgranted
- Level of USAID funding requested for the project and cost share amount
- The application category
- The proposed start and end dates
- Main authors of the proposal and proposal contact at U.S. headquarters office

2. Project Context

This section of the application presents a preliminary assessment which provides relevant data to support the need and approach for reducing the burden of TB in the proposed project site. This analysis serves as the basis for rationale for the proposed project including the elements of the Stop TB Strategy to be addressed and the major strategies and interventions for the proposed project.

❖ Guidance:

- Briefly describe the location of the proposed project and provide a map(s) with scale in an **attachment**. Estimate the total population and the number of villages or other community units that are in the target area. Please cite the sources of data.
- Provide an overview of the general health status of the population and the health care delivery system in the country and the current status of health care services in the proposed project site.
- The PVO should respond to the following as well as include other relevant information which supports the applicants' proposed intervention, methodology, etc.
 - Socio-economic characteristics of the population (such as economy, religion, gender equity, ethnic groups, literacy or other) that have an impact on TB and the use of TB services.
 - Provide relevant information on pertinent household behaviors and care seeking practices. The applicant is **not** expected to have conducted a survey, but general knowledge of the local population should be evident.
- Describe the structure of the National TB Program (NTP) including the objectives/targets of the national TB policy and strategic plan, the government's commitment to the Stop TB Strategy, and the structure for the provision of TB services in the country. Provide an analysis of the TB epidemiological situation in the country and proposed site using recent data. Please cite data sources.
- Discuss the existing diagnostic TB treatment services available to the target population, including: detection of TB cases; type and availability of TB diagnostic laboratory services; system for providing TB treatment (public and private sector), and availability of directly observed treatment; treatment protocols; source and availability of TB drug pharmaceuticals; and the monitoring and evaluation system. **Discuss the accessibility and quality of these services.**
- Map the current efforts of national and international in-country TB partners, including activities not in the proposed project site. Describe any geographic or programmatic gaps that justify the proposed site and intervention(s) selection ensuring complementarities with the other partners and the NTP. Applications are not recommended to address all elements

of the Stop TB Strategy, but should clearly demonstrate that the proposed areas are gaps and that other complementary components (that the applicant does not plan to address) are being addressed by the NTP and/or other TB partners in country, in order to provide a comprehensive approach. For example, the applicant proposes interventions to improve detection of TB suspects. The application should show how other organizations are supporting the facilities to handle the increased demand for quality diagnosis.

- Describe the status of any global initiatives (e.g. Global Fund for AIDS, TB and Malaria (GFATM); Stop TB Global Drug Facility) that may impact the National TB Program and the existence and membership of TB coordinating bodies in the country.
- Applicants proposing TB/HIV activities should include a description of the HIV epidemiologic problem, relevant government policies, a description of the type, availability and quality of HIV services and the opportunities/obstacles to linking/integrating these services with the proposed TB project.

3. Project Strategy

This section should provide a clear picture of the proposed project and overall strategies, details on the proposed TB intervention and approaches to implement that intervention, including training and how sustainability of the project will be addressed. It will be important to clearly define linkages with other projects and how synergy among projects will be developed.

❖ Guidance:

- Provide the goal and objectives of the proposed project.
- Provide an overview of the project strategy; please link the strategy with the project context and clearly identify the target beneficiaries. In contrast to most of the interventions addressed in the CSHGP, it is important to note that infectious TB cases, which are found in adults, are the primary target population for TB prevention and control projects.
- As identified in the project context, further describe the programmatic aspect(s) of the tuberculosis prevention and control project that will be implemented or strengthened in this project:
 - Identify the specific USAID TB sub-elements(s) to be implemented or strengthened and explain the approaches used to accomplish this.
 - Explain how the proposed activities are consistent with the Stop TB Strategy and NTP Strategic Plan.
 - Explain how the proposed activities will strategically link with/complement the efforts of other partners based on the mapping in the project context section.

- Explain the applicant’s proposed plan for sustainability, making linkages to scale-up and sharing lessons learned within the country. This could include participation in coordinating bodies including the national level Stop TB Partnerships and programming/planning meetings at the various levels of the systems.
- If appropriate, describe proposed strategy(s) and activities to strengthen the linkages between or the integration of TB and HIV projects.
- Address issues of quality and access (including gender inequality) as well as integration of TB services with other interventions.
- If the government may become a GFATM recipient describe the strategy/plan for dealing with any implication this may have for the proposed project.
- Discuss how the approach used will involve the individual, family, health worker, community, district and/or national levels.
- As an **attachment**, please present a brief, one- to two-page work plan in table format which reflects the overall project approach, objectives, timeline, and budget. Also present the project’s training activities/plan in table format for each intervention that includes a brief description of the training objective, number of participants, and timing of training as an **attachment**.
- Discuss how progress towards project objectives will be measured. Describe how current data on indicators will be collected, analyzed and used for project management.

The USAID TB Element and Stop TB strategy includes a standard set of internationally recognized indicators for national level reporting as well as routine project monitoring and evaluation. Due to the variation in projects, all applicants will be required to report on only two standard TB indicators: “Treatment Success Rate” and Case Notification Rate as defined:

Treatment Success Rate

Numerator: Number of new smear-positive pulmonary TB cases registered in a specified period that were cured plus the number that completed treatment

Denominator: Total number of new smear-positive pulmonary TB cases registered in the same period

Case Notification Rate

Numerator: Number of new smear-positive pulmonary TB cases reported
X 100,000

Denominator: Total population in the specified area

Additionally, applicants **should** include other indicators that reflect the various components of the proposed project. The Compendium of Indicators for Monitoring and Evaluating NTPs found at http://whqlibdoc.who.int/hq/2004/WHO_HTM_TB_2004.344.pdf should be consulted as part of this process. In addition, the recent evaluation of the CSHGP TB grants came up with a suggested list of facility and community-based indicators that could be used for certain interventions (See Annex C). There are also Advocacy, Communication and Social Mobilization (ACSM) indicators available on the Stop TB Partnership's ACSM Country Level webpage. The link to this and other tools can be found at: http://www.stoptb.org/wg/advocacy_communication/acsmcl/tools.asp

Please note: The standard child survival indicators are not appropriate for a proposed tuberculosis project.

- Describe the government's existing routine monitoring and evaluation system for TB. Describe how (if appropriate) the proposed project will strengthen the government's data collection system. The World Health Organization (WHO) has established a set of internationally recognized and accepted indicators and tools for reporting, monitoring and evaluating TB projects. Applicants are expected to use the WHO system if established by the government or, if appropriate, implement the WHO system (if it does not exist) within the structure of the NTP. Do not create a new or parallel system.
- Describe the types of baseline assessments, studies, or surveys that will be carried out. Include baselines of local partner capacity, and any qualitative and population-based assessments.
- In the attachments, provide a matrix or other graphic to present the information which summarizes the proposed project's goal, results-based objective(s) and major activities. These should be the same as already discussed in the narrative of earlier sections. In addition, include indicator(s) for measuring the achievement of each objective. The sample program matrix in Annex G is a suggested template. If the applicant PVO has standardized a particular approach, such as a logical framework or a results framework, please use the organization's preferred format. The graphic should provide the reader with a concise summary of the proposed project, to what the project will hold itself accountable to achieve, and how the project will measure these outcomes and impact.

4. Partnerships

This section of the application provides information about the partnerships that will be fostered by this proposal. The section should provide evidence that the PVO has coordinated and is collaborating with all key players in TB and/or TB/HIV nationally and at the selected site.

❖ Guidance:

- Provide a matrix outlining the partner(s), geographic area the partner(s) will be working in, technical area they will be covering, and the gap they are filling in the project.

- The proposed activity(s) need to be appropriate and coordinated closely with other actors in the TB and health sectors to ensure a comprehensive Stop TB Strategy and to avoid overlap. Include those of other PVOs, USAID field missions, networks or associations of NGOs, local organizations, private commercial and traditional providers, multi-bilateral partners, international TB organizations, and the government, if not already addressed in the mapping in the project context section.
- Describe the type and background of the partner organization(s) and/or groups with which the applicant will work and why they were selected. Describe their experience in TB programming, technical capacity, and role in this project and how it complements the U.S. PVO's comparative advantage.
- Discuss the approach the project will take, including tools to be used, to build the organizational capacity of the local partner (which may be the NTP, the private sector, and/or an NGO), and to assist the local partner in its organizational development. Describe the objectives of the local partner and how the activities and achievements of this project will benefit them in the future.
- Describe how the project is consistent with the relevant USAID Mission and CSHGP priorities for TB and TB/HIV. In addition, provide clear linkages to other Mission/PEPFAR-supported TB, TB/HIV, and/or other health projects.
- Describe the process used to involve all relevant stakeholders (e.g. MOH, NTP, community and local partners) in the selection of the site, interventions, and strategies.
- In an **attachment**, include a letter showing support or endorsement for the proposed project from the NTP and any other organizations with which the project will establish a formal relationship. Each letter must be dated within three months of the application submission and include the partners' role in the project.

5. Organizational Capacity

This section provides an overview of the demonstrated capacity and capability of the organization to manage and implement the technical interventions of the proposed project. Please highlight those areas of project management that were not discussed in other sections.

❖ Guidance:

- Briefly describe the U.S. PVO applicant's experience in designing, implementing, monitoring, and evaluating TB prevention and control projects at the regional, national and community level.
- Briefly describe how the capacity of the U.S. PVO headquarters and local field staff will be strengthened in the planning, implementation, and evaluation of TB control projects.

- Describe the U.S. PVO applicant's operations, current agreements and working relationships with the host country government and other organizations within the country proposed in this application. Documentation of current legal authorization for the U.S. PVO, or international affiliate, to operate in the host country must be provided in an **attachment**. Also in the **attachments**, please include draft Memoranda of Understanding (MOUs) with partners, if applicable.
- Applications must demonstrate the ability of the U.S. PVO to ensure the implementation of a quality TB project in one of the following ways:
 - Past performance in the implementation of TB prevention and control projects in a developing country. Provide information on where projects have been carried out, describe the strategy(s), activities implemented, project partners, relationship with the National TB Program, and project outcomes;
 - Technical capacity at the PVO Headquarters with demonstrated field experience in implementing TB prevention and control projects (include the HQ backstopping individual's C.V. in an **attachment**). Within the work plan, the applicant needs to clearly demonstrate how TB technical capacity development will be achieved at the country level, to ensure appropriate implementation;
 - Applicants for which TB is a new activity or have limited experience must include in the proposal a formal partnership with an organization experienced in TB prevention and control that will provide technical assistance to the project and capacity development to the U.S. PVO. Describe the partner organization's TB experience and include a letter of support from the institution that confirms their support for the project and gives a description of the technical assistance they will provide to the project. The work plan and budget must reflect this involvement.
- Briefly describe other sector projects the PVO is involved with in the same geographic area (such as food security, HIV, or education) where innovative opportunities may exist for synergies of projects and plans to synergize with other projects where applicable.
- Describe the proposed management structure for this project and provide a project organogram in the attachments. Include in the narrative a description of the responsibilities of the PVO, partners, and principal organizations and staff involved, reporting relationships, authority, and lines of communication within and between each of these organizations. Please include job descriptions and CVs of key staff (headquarters backstop, project director and M&E position) as **attachments**.
- In the **attachments**, please provide an organizational chart that clearly delineates the key personnel responsible for technically backstopping this project in the PVO U.S. headquarters office and managing this project in the in-country office. Describe how they fit into the overall organization and the linkages between the headquarters, regional (if applicable), and field project personnel.

- In the **attachments**, please provide a **table** of ALL persons who will contribute to achieving the results of the project. This may include, but is not limited to: PVO headquarters and field staff, local partner staff, MOH/NTP staff, community health workers and private sector providers. For each type of worker provide: 1) the number of workers in that category; 2) organizational affiliation; 3) main responsibilities; 4) TB-specific expertise; 5) percent of effort devoted to project activities; and 6) entity responsible for remunerating the worker (e.g. PVO, MOH/NTP, community, volunteer).
- Discuss the roles and responsibilities of project staff vis-à-vis budgeting, financial monitoring, and reporting on the financial status of the project, to ensure accountability in the use of U.S. Government and matching funds.
- In table format, please present a brief, one- to two-page work plan, which reflects the overall project approach and budget. Be sure to include a separate table for the project's training plan as described in the Project Strategy section.

Technical Evaluation Criteria for TB Category Applications

All sub-criteria are weighted equally unless otherwise stipulated.

Executive Summary (1 point) – 1 page maximum

- Clear and concise overview of the proposed project that includes all elements listed in the Executive Summary guidelines.

Project Context (9 points)

- Detailed description of the TB burden, particularly in the target area.
- Clear and concise description of health care delivery services, including both formal and informal sectors in relation to TB services.
- Clear and comprehensive overview of the TB control program in target area according to the components of the Stop TB Strategy including strengths and weaknesses, which support the selection of proposed TB interventions.
- Clear description of socioeconomic factors and other parameters (constraints and opportunities) that influence the TB burden.
- Clear and comprehensive mapping of other TB and/or TB/HIV activities by other partners (PVOs, other organizations, USAID field mission projects, global initiatives, etc.) and opportunities for synergies of project interventions and strategies.

Project Strategy: (45 points)

- Selected strategies and interventions clearly support stated goals and objectives.
- Proposed project includes a strong rationale for selected population, selected geographic area, the chosen technical intervention package to address gaps (omissions and inclusions), chosen levels of implementation (i.e., household, community, facility, policy), the role of the implementing partner(s), and chosen delivery strategy.
- Clear description of how the project will relate to the NTP Strategic Plan and specific activities and partners working within it nationally and in the project area.

- Clear description and appropriate selection of technically sound activities through which the project plans will achieve improved quality, access, and equity at the individual/community levels.
- Clear description and appropriate selection of technically sound activities through which the project plans will achieve improved quality, access, and equity at the facility level (includes referral activities).
- Issues of sustainability and scale-up fully addressed and realistic to the situation.
- Work plan reflects project goal, objectives, activities, and budget.

Partnerships (16 points)

- USAID Mission strategies and priorities identified and congruent with proposed project as well as clear linkages are described to other Mission- and/or PEPFAR-supported TB and TB/HIV projects and efforts.
- NTP and target area stakeholders appropriately involved in the selection of site, interventions and/or strategies and methodologies that will be scaled up.
- Rationale for choice of implementing partners/sub-grantees.
- Clear description of the objectives of the local partner and how the project will build the capacity of the local partner.
- Letters of support provided demonstrating partners' understanding of their role in the proposed project (NTP letter is mandatory but USAID Mission letter is not required).

Organizational Capacity (20 points)

- Organization has demonstrated capacity and capability to implement the proposed technical and programmatic approaches through discussion of results and/or programmatic lessons learned of previous TB projects. If the organization does not have this experience, a technical partner should be identified for providing this expertise with a key role in the planning and implementation of the proposed project.
- Sufficient and appropriate human resources with technical TB expertise are devoted to the project.
- Roles and responsibilities of key staff and project partners are clear.

Monitoring and Evaluation (9 points)

- Proposed project indicators are globally accepted, relevant to proposed programming, and consistent with the NTP M&E system. In addition, the proposed plan to monitor these indicators is feasible.
- Process to gather, analyze and use data in management of project is clearly articulated and feasible.
- Planned baseline, midterm, and final assessments are appropriate and budgeted for.

III. Cost Application Guidelines

A. Budget Preparation and Submission Instructions

Cost Share – An Applicant must contribute from its non-U.S. government resources, at least 25% of the total cost of the proposed project.

Standard Form 424 & 424A

Standard Form 424 is the standard form used by applicants as the required face sheet for applications submitted for Federal assistance. Standard Form 424A is the form used by applicants for presenting overall budget information. **These forms (424 & 424A), along with detailed instructions for completing them, are included in ANNEX F of this document.** Please pay careful attention to the budget instructions. There are specific criteria that must be met for this program, some of which may have been amended since the previous RFA. Failure to accurately complete these forms could result in a non-funded application.

The Standard Form 424A, Section A, requests costs organized by headquarters and field, and by Federal and Non-Federal. This information should be the same as that presented in other sections. Federal refers to the funds requested from USAID and Non-Federal refers to funding from the applicant and other sources. The amounts for Federal and Non-Federal presented here should be the same as the Estimated Funding presented on Standard Form 424, 15.a and b, plus any entry for e. The total project amount on SF 424 should be the same amount presented in Section A and in Section B. For further information regarding use of Non-Federal funds, refer to the discussion of budget narrative and “cost-share” in this section of the RFA.

Headquarters costs are direct costs incurred by the U.S. PVO/NGO head office in the United States in support of the child survival and health projects overseas. This does not duplicate established indirect cost rates. USAID will support up to 15% of the direct costs of the USAID funds in the project budget at the PVO/NGO’s U.S. headquarters for support to the field project, and for improving child survival and health technical and operational capabilities of the PVO/NGO(s). USAID will support up to 20% of headquarters costs for New Partner projects to allow for improving the organization’s institutional capacity of child survival and health programming. The headquarters budget should be directly related to the description of how the PVO/NGO builds and maintains technical and operational capacity. In addition to backstopping and site visits to the field project, types of activities that PVO/NGOs have included in the past are continuing education opportunities for staff, information exchange and technical networking among PVO/NGOs, reference materials, and observational visits to the other field projects of the same organization or others. All headquarters costs must be appropriately distributed in the correct amounts and contained within the correct categories of Standard Form 424A, Section B, as per the guidelines in Section D.

Field costs should include all funds designated for expenditure within the host-country for carrying out the planned project. All field costs must be appropriately distributed in the correct amounts and

contained within the correct categories of Standard Form 424A, Section B, as per the guidelines in this RFA.

Standard Form 424A, Section B is divided into eleven “Object Class Categories.” The Object Class Categories must be presented in two columns, “Federal,” which are the costs being funded by the USAID portion of the over-all project budget, and “Non-Federal,” which are the costs covered by the cost share portion of the entire project budget. The entire project budget must be appropriately distributed and contained within these categories and columns. The categories include Personnel, Fringe Benefits, Travel, Equipment, Supplies, Contractual, Construction, Other, Total Direct Charges, Indirect Charges, and Totals. The Construction category does not apply to this program. Project costs proposed for “training” and for “sub-grants” must be included in the “Other” Object Class Category. For further elaboration on each of the Object Class Categories, please refer to the instructions in Section D. Section D includes a sample Standard Form 424 and 424A.

Detailed Budget and Budget Narrative

The detailed budget and narrative should follow the SF 424 and 424A and should fully define and support the line item costs for both the Federally-funded (USAID) and Non-Federally funded (PVO/NGO cost-share) portions of the budget. The budget narrative should clearly describe the method used to estimate and the rationale for all costs. For example, when describing international airfare, the budget narrative should specify the amount estimated for roundtrip airfare by destination, should provide the source for the estimate (travel agent, airline, etc.), and should indicate the number of trips expected. Simply stating a lump sum for international airfare is not adequate. Based on the calculations shown in the narrative, the Cognizant Technical Officer (CTO) and the Agreement Officer should be able to easily verify all costs for the proposed project. The costs proposed for “training” and “sub-grants” must be itemized in the explanation of the Object Class Categories within the budget narrative, so that they may be subsequently negotiated and included in the appropriate category of the Cooperative Agreement Budget.

All costs contained in the budget should accurately reflect the planned level of project activities in the project design. For example, the training budget should reflect the specific training activities to be undertaken by the project. If the project approach includes training, then the budget should reflect the detailed training costs for this level of activity. This same principle should be maintained throughout the budget when itemizing all field costs.

The detailed budget and budget narrative should contain the following information for each year of the project as well as for the life of the project, and presented by Federal and Non-Federal funds:

- The breakdown of all costs associated with the project according to costs of, if applicable, headquarters, regional and/or country offices;
- The breakdown of all costs according to each partner organization involved in the project;
- The costs associated with external, expatriate technical assistance and those associated with local in-country technical assistance;

- The breakdown of the financial and in-kind contributions of all organizations involved in implementing this Cooperative Agreement;
- Potential contributions of non-USAID or private commercial donors to this Cooperative Agreement each year (phase-out of USAID funding for key personnel is encouraged); and
- The procurement plan for commodities (note that contraceptives will not be provided under this Cooperative Agreement).

Procurement Plan

Applications for all program categories should include a detailed procurement plan containing explicit information on how procurements will be accomplished. Carefully read the guidance in 22 CFR 228. **GH/HIDN does NOT customarily seek waivers for the purchase of non-U.S. motor vehicles, pharmaceuticals, used equipment, seeds or pesticides. The applicant should consider funding such commodities with the Non-Federal portion of the program budget.**

The recipient is expected to comply with USAID Eligibility Rules for Goods and Services in the Standard Provisions and 22 CFR Part 228, and use its cost-share for any goods and services that do not comply with these rules.

B. References

- Mandatory Standard Provisions for U.S., Nongovernmental Recipients:
<http://www.usaid.gov/policy/ads/300/303maa.pdf>
- 22 CFR 226 USAID Assistance Regulations:
http://www.access.gpo.gov/nara/cfr/waisidx_02/22cfr226_02.html
- 22 CFR 228 USAID Source, Origin, Nationality Regulations:
http://www.access.gpo.gov/nara/cfr/waisidx_01/22cfr228_01.html
- ADS Series 300 Acquisition and Assistance: <http://www.usaid.gov/pubs/ads/>
- AAPD 02-10 Cost Sharing in Grants and Cooperative Agreements to NGOs:
http://www.usaid.gov/business/business_opportunities/cib/pdf/aapd02_10.pdf
- SF 424, SF 424A, SF 424B Grants Management:
http://www.whitehouse.gov/omb/grants/grants_forms.html
- AAPD 05-04 Implementation of the United States Leadership Against HIV/AIDS, Tuberculosis and Malaria Act of 2003 – Eligibility Limitation on the Use of Funds and Opposition to Prostitution and Sex Trafficking:
http://www.usaid.gov/business/business_opportunities/cib/pdf/aapd05_04.pdf

- Guidance on the Definition and Use of the Child Survival and Health Programs Fund and the Global HIV/AIDS Initiative Account: <http://www.usaid.gov/policy/ads/200/200mab.pdf>

IV. Additional Documentation

Certain documents are required to be submitted by an applicant in order for a Grant Officer to make a determination of responsibility. However, it is USAID policy not to burden applicants with undue reporting requirements if that information is readily available through other sources.

The following sections describe additional documentation that applicants for Assistance must submit to USAID prior to award. See Section B.I regarding page limits. Applicants are encouraged to be as concise as possible, but still provide the necessary detail to address the following:

A. A current Negotiated Indirect Cost Rate Agreement

B. Applicants who do not currently have a Negotiated Indirect Cost Rate Agreement (NICRA) from their cognizant agency shall submit the following information:

1. Copies of the applicant's financial reports for the previous 3-year period, which have been audited by a certified public accountant or other auditor satisfactory to USAID;
2. Projected budget, cash flow and organizational chart; and
3. A copy of the organization's accounting manual.

C. Applicants should submit any additional evidence of responsibility deemed necessary for the Grant Officer to make a determination of responsibility. The applicant should submit a list of all past and current U.S. government contracts, cooperative agreements and grants for the last three (3) years; this will be included in the **attachments** section. The information submitted should substantiate that the Applicant:

1. Has adequate financial resources or the ability to obtain such resources as required during the performance of the award.
2. Has the ability to comply with the award conditions, taking into account all existing and currently prospective commitments of the applicant, nongovernmental and governmental.
3. Has a satisfactory record of performance. Past relevant unsatisfactory performance is ordinarily sufficient to justify a finding of non-responsibility, unless there is clear evidence of subsequent satisfactory performance.
4. Has a satisfactory record of integrity and business ethics; and
5. Is otherwise qualified and eligible to receive a grant under applicable laws and regulations (e.g., EEO).

D. Applicants that have never received a grant, cooperative agreement or contract from the U.S. Government are required to submit a copy of their accounting manual. If a copy has already been submitted to the U.S. Government, the applicant should advise which Federal Office has a copy.

E. Acknowledgement of Amendments to the RFA – Applicants shall acknowledge receipt of any amendment to this RFA by signing and returning the amendment. The Government must receive the acknowledgment by the time specified for receipt of applications.

F. AAPD 05-04 Certification for HIV/AIDS Program Funds – Applicants proposing a 30% or less HIV/AIDS intervention are required to comply with AAPD 05-04, ‘Implementation of the United States Leadership Against HIV/AIDS, Tuberculosis and Malaria Act of 2003 – Eligibility Limitation on the Use of Funds and Opposition to Prostitution and Sex Trafficking’ by signing the certification in Section D, Part IV of this RFA.

G. If recommended forward, the Applicant must submit a Branding Strategy and Marking Plan according to the guidelines set in the Standard Provision for U.S. Nongovernmental Recipients, MARKING UNDER USAID-FUNDED ASSISTANCE INSTRUMENTS (DECEMBER 2005). The Standard Provisions for U.S., Nongovernmental Recipients have been included in Section E of the RFA. Additionally, a link to the applicable Standard Provisions has been included in the section entitled ‘References’ on the preceding page.

V. Additional Considerations

In addition to the aforementioned guidelines, the applicant is requested to take note of the following:

A. Unnecessarily Elaborate Applications: Unnecessarily elaborate brochures or other presentations beyond those sufficient to present a complete and effective application in response to this RFA are not desired and may be construed as an indication of the applicant’s lack of cost consciousness. Elaborate art work, expensive paper and bindings, and expensive visual and other presentation aids are neither necessary nor wanted.

B. Preparation of Applications:

1. Applicants who include data that they do not want disclosed to the public for any purpose or used by the U.S. Government except for evaluation purposes, should:

(a) Mark the title page with the following legend:

“This application includes data that shall not be disclosed outside the U.S. Government and shall not be duplicated, used, or disclosed – in whole or in part – for any purpose other than to evaluate this application. If, however, a grant is awarded to this applicant as a result of – or in connection with – the submission of this data, the U.S. Government shall have the right to duplicate, use, or disclose the data to the extent provided in the resulting grant. This restriction does not limit the U.S. Government’s right to use information contained in this

data if it is obtained from another source without restriction. The data subject to this restriction are contained in sheets;” and

(b) Mark each sheet of data it wishes to restrict with the following legend:

“Use or disclosure of data contained on this sheet is subject to the restriction on the title page of this application.”

C. Explanation to Prospective Applicants: Any prospective applicant desiring an explanation or interpretation of this RFA must request it in writing within three weeks of receipt of the application to allow a reply to reach all prospective applicants for the submission of their applications. Oral explanations or instructions given before award of a Grant will not be binding. Any information given to a prospective applicant concerning this RFA will be furnished promptly to all other prospective applicants as an amendment of this RFA, if that information is necessary in submitting applications or if the lack of it would be prejudicial to any other prospective applicants.

D. Award:

1. The Government may award one or more Agreements resulting from this RFA to the responsible applicant(s) whose application(s) conforming to this RFA offers the greatest value (see also Section II of this RFA). The Government may (a) reject any or all applications, (b) accept other than the lowest cost application, (c) accept more than one application (see Section III, Selection Criteria), (d) accept alternate applications, and (e) waive informalities and minor irregularities in applications received.
2. The Government may award one or more Agreement(s) on the basis of initial applications received, without discussions. Therefore, each initial application should contain the applicant’s best terms from a cost and technical standpoint.
3. A written award mailed or otherwise furnished to the successful applicant(s) within the time for acceptance specified either in the application(s) or in this RFA (whichever is later) shall result in a binding Agreement without further action by either party. Before the application’s specified expiration time, the Government may accept an application, whether or not there are negotiations after its receipt, unless a written notice of withdrawal is received before award. Negotiations conducted after receipt of an application do not constitute a rejection or counteroffer by the Government.
4. Neither financial data submitted with an application, nor representations concerning facilities or financing, will form a part of the resulting Agreement(s).

E. Authority to Obligate the Government: The Grant Officer is the only individual who may legally commit the Government to the expenditure of public funds. No costs chargeable to the proposed Agreement may be incurred before receipt of either a fully executed Agreement or a specific, written authorization from the Grant Officer.

SECTION D: REQUIRED FORMS, CERTIFICATIONS, ASSURANCES, AND OTHER STATEMENTS OF RECIPIENT

I. Certifications

1. Assurance of Compliance with Laws and Regulations Governing Nondiscrimination in Federally Assisted Programs
2. Certification Regarding Lobbying
3. Prohibition on Assistance to Drug Traffickers for Covered Countries
4. Terrorist Financing
5. Certification of Recipient

II. Key Individual Certification Narcotics Offenses and Drug Trafficking

III. Participant Certification Narcotics Offenses and Drug Trafficking

IV. Certification of Compliance with the Standard Provisions entitled “Condoms” and “Prohibition of the Promotion or Advocacy of the Legalization or Practice of Prostitution or Sex Trafficking.”

V. Survey on Ensuring Equal Opportunity for Applicants

VI. Other Statements of Recipient

1. Authorized Individuals
2. Taxpayer Identification Number
3. Contractor Identification Number – Data Universal Numbering System Number
4. Letter of Credit Number
5. Procurement Information
6. Past Performance Reference
7. Type of Organization
8. Estimated Cost of Communication Products

CERTIFICATIONS, ASSURANCES, AND OTHER STATEMENTS OF THE RECIPIENT (MAY 2006)

NOTE: When these Certifications, Assurances, and Other Statements of Recipient are used for cooperative agreements, the term "Grant" means "Cooperative Agreement".

PART I - CERTIFICATIONS AND ASSURANCES

1. ASSURANCE OF COMPLIANCE WITH LAWS AND REGULATIONS GOVERNING NON-DISCRIMINATION IN FEDERALLY ASSISTED PROGRAMS

Note: This certification applies to Non-U.S. organizations if any part of the program will be undertaken in the United States.

(1) The recipient hereby assures that no person in the United States shall, on the bases set forth below, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under, any program or activity receiving financial assistance from USAID, and that with respect to the Cooperative Agreement for which application is being made, it will comply with the requirements of:

- (a) Title VI of the Civil Rights Act of 1964 (Pub. L. 88-352, 42 U.S.C. 2000-d), which prohibits discrimination on the basis of race, color or national origin, in programs and activities receiving Federal financial assistance;
- (b) Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), which prohibits discrimination on the basis of handicap in programs and activities receiving Federal financial assistance;
- (c) The Age Discrimination Act of 1975, as amended (Pub. L. 95-478), which prohibits discrimination based on age in the delivery of services and benefits supported with Federal funds;
- (d) Title IX of the Education Amendments of 1972 (20 U.S.C. 1681, et seq.), which prohibits discrimination on the basis of sex in education programs and activities receiving Federal financial assistance (whether or not the programs or activities are offered or sponsored by an educational institution); and
- (e) USAID regulations implementing the above nondiscrimination laws, set forth in Chapter II of Title 22 of the Code of Federal Regulations.

(2) If the recipient is an institution of higher education, the Assurances given herein extend to admission practices and to all other practices relating to the treatment of students or clients of the institution, or relating to the opportunity to participate in the provision of services or other benefits to such individuals, and shall be applicable to the entire institution unless the recipient establishes to the satisfaction of the USAID Administrator that the institution's practices in designated parts or programs of the institution will in no way affect its practices in the program of the institution for which financial assistance is sought, or the beneficiaries of, or participants in, such programs.

(3) This assurance is given in consideration of and for the purpose of obtaining any and all Federal grants, loans, contracts, property, discounts, or other Federal financial assistance extended after the date hereof to

the recipient by the Agency, including installment payments after such date on account of applications for Federal financial assistance which was approved before such date. The recipient recognizes and agrees that such Federal financial assistance will be extended in reliance on the representations and agreements made in this Assurance, and that the United States shall have the right to seek judicial enforcement of this Assurance. This Assurance is binding on the recipient, its successors, transferees, and assignees, and the person or persons whose signatures appear below are authorized to sign this Assurance on behalf of the recipient.

2. CERTIFICATION REGARDING LOBBYING

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal Cooperative Agreement, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, United States Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that: If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

3. PROHIBITION ON ASSISTANCE TO DRUG TRAFFICKERS FOR COVERED COUNTRIES AND INDIVIDUALS (ADS 206)

USAID reserves the right to terminate this Agreement, to demand a refund or take other appropriate

measures if the Grantee is found to have been convicted of a narcotics offense or to have been engaged in drug trafficking as defined in 22 CFR Part 140. The undersigned shall review USAID ADS 206 to determine if any certifications are required for Key Individuals or Covered Participants.

If there are COVERED PARTICIPANTS: USAID reserves the right to terminate assistance to or take other appropriate measures with respect to, any participant approved by USAID who is found to have been convicted of a narcotics offense or to have been engaged in drug trafficking as defined in 22 CFR Part 140.

4. CERTIFICATION REGARDING TERRORIST FINANCING IMPLEMENTING EXECUTIVE ORDER 13224

By signing and submitting this application, the prospective recipient provides the certification set out below:

- (1) The Recipient, to the best of its current knowledge, did not provide, within the previous ten years, and will take all reasonable steps to ensure that it does not and will not knowingly provide, material support or resources to any individual or entity that commits, attempts to commit, advocates, facilitates, or participates in terrorist acts, or has committed, attempted to commit, facilitated, or participated in terrorist acts, as that term is defined in paragraph 3.
- (2) The following steps may enable the Recipient to comply with its obligations under paragraph 1:
 - (a) Before providing any material support or resources to an individual or entity, the Recipient will verify that the individual or entity does not (i) appear on the master list of Specially Designated Nationals and Blocked Persons, which list is maintained by the U.S. Treasury's Office of Foreign Assets Control (OFAC) and is available online at OFAC's website : <http://www.treas.gov/offices/eotffc/ofac/sdn/t11sdn.pdf>, or (ii) is not included in any supplementary information concerning prohibited individuals or entities that may be provided by USAID to the Recipient.
 - (b) Before providing any material support or resources to an individual or entity, the Recipient also will verify that the individual or entity has not been designated by the United Nations Security (UNSC) sanctions committee established under UNSC Resolution 1267 (1999) (the "1267 Committee") [individuals and entities linked to the Taliban, Osama bin Laden, or the Al Qaida Organization]. To determine whether there has been a published designation of an individual or entity by the 1267 Committee, the Recipient should refer to the consolidated list available online at the Committee's website: <http://www.un.org/Docs/sc/committees/1267/1267ListEng.htm>.
 - (c) Before providing any material support or resources to an individual or entity, the Recipient will consider all information about that individual or entity of which it is aware and all public information that is reasonably available to it or of which it should be aware.
 - (d) The Recipient also will implement reasonable monitoring and oversight procedures to safeguard against assistance being diverted to support terrorist activity.
- (3) For purposes of this Certification-
 - (a) "Material support and resources" means currency or monetary instruments or financial securities, financial services, lodging, training, expert advice or assistance, safehouses, false documentation or identification, communications equipment, facilities, weapons, lethal substances,

explosives, personnel, transportation, and other physical assets, except medicine or religious materials.”

(b) “Terrorist act” means-

(i) an act prohibited pursuant to one of the 12 United Nations Conventions and Protocols related to terrorism (see UN terrorism conventions Internet site:

<http://untreaty.un.org/English/Terrorism.asp>); or

(ii) an act of premeditated, politically motivated violence perpetrated against noncombatant targets by subnational groups or clandestine agents; or

(iii) any other act intended to cause death or serious bodily injury to a civilian, or to any other person not taking an active part in hostilities in a situation of armed conflict, when the purpose of such act, by its nature or context, is to intimidate a population, or to compel a government or an international organization to do or to abstain from doing any act.

(c) “Entity” means a partnership, association, corporation, or other organization, group or subgroup.

(d) References in this Certification to the provision of material support and resources shall not be deemed to include the furnishing of USAID funds or USAID-financed commodities to the ultimate beneficiaries of USAID assistance, such as recipients of food, medical care, micro-enterprise loans, shelter, etc., unless the Recipient has reason to believe that one or more of these beneficiaries commits, attempts to commit, advocates, facilitates, or participates in terrorist acts, or has committed, attempted to commit, facilitated or participated in terrorist acts.

(e) The Recipient’s obligations under paragraph 1 are not applicable to the procurement of goods and/or services by the Recipient that are acquired in the ordinary course of business through contract or purchase, e.g., utilities, rents, office supplies, gasoline, etc., unless the Recipient has reason to believe that a vendor or supplier of such goods and services commits, attempts to commit, advocates, facilitates, or participates in terrorist acts, or has committed, attempted to commit, facilitated or participated in terrorist acts.

This Certification is an express term and condition of any agreement issued as a result of this application, and any violation of it shall be grounds for unilateral termination of the agreement by USAID prior to the end of its term.

5. CERTIFICATION OF RECIPIENT

By signing below the recipient provides certifications and assurances for (1) the Assurance of Compliance with Laws and Regulations Governing Non-Discrimination in Federally Assisted Programs, (2) the Certification Regarding Lobbying, (3) the Prohibition on Assistance to Drug Traffickers for Covered Countries and Individuals (ADS 206) and (4) the Certification Regarding Terrorist Financing Implementing Executive Order 13224 above.

RFA/APS No. _____

Application No. _____

Date of Application _____

Name of Recipient _____

Typed Name and Title _____

Signature _____

Date _____

PART II - KEY INDIVIDUAL CERTIFICATION NARCOTICS OFFENSES AND DRUG TRAFFICKING

I hereby certify that within the last ten years:

1. I have not been convicted of a violation of, or a conspiracy to violate, any law or regulation of the United States or any other country concerning narcotic or psychotropic drugs or other controlled substances.
2. I am not and have not been an illicit trafficker in any such drug or controlled substance.
3. I am not and have not been a knowing assistor, abettor, conspirator, or colluder with others in the illicit trafficking in any such drug or substance.

Signature: _____

Date: _____

Name: _____

Title/Position: _____

Organization: _____

Address: _____

Date of Birth: _____

NOTICE:

1. You are required to sign this Certification under the provisions of 22 CFR Part 140, Prohibition on Assistance to Drug Traffickers. These regulations were issued by the Department of State and require that certain key individuals of organizations must sign this Certification.
2. If you make a false Certification you are subject to U.S. criminal prosecution under 18 U.S.C. 1001.

PART III - PARTICIPANT CERTIFICATION NARCOTICS OFFENSES AND DRUG TRAFFICKING

1. I hereby certify that within the last ten years:

a. I have not been convicted of a violation of, or a conspiracy to violate, any law or regulation of the United States or any other country concerning narcotic or psychotropic drugs or other controlled substances.

b. I am not and have not been an illicit trafficker in any such drug or controlled substance.

c. I am not or have not been a knowing assistor, abettor, conspirator, or colluder with others in the illicit trafficking in any such drug or substance.

2. I understand that USAID may terminate my training if it is determined that I engaged in the above conduct during the last ten years or during my USAID training.

Signature: _____

Name: _____

Date: _____

Address: _____

Date of Birth: _____

NOTICE:

1. You are required to sign this Certification under the provisions of 22 CFR Part 140, Prohibition on Assistance to Drug Traffickers. These regulations were issued by the Department of State and require that certain participants must sign this Certification.

2. If you make a false Certification you are subject to U.S. criminal prosecution under 18 U.S.C. 1001.

PART IV - CERTIFICATION OF COMPLIANCE WITH THE STANDARD PROVISIONS ENTITLED “CONDOMS” AND “PROHIBITION ON THE PROMOTION OR ADVOCACY OF THE LEGALIZATION OR PRACTICE OF PROSTITUTION OR SEX TRAFFICKING.”

Applicability: This certification requirement only applies to the prime recipient. Before a U.S. or non-U.S. non-governmental organization receives FY04-FY08 HIV/AIDS funds under a grant or cooperative agreement, such recipient must provide to the Agreement Officer a certification substantially as follows:

“[Recipient's name] certifies compliance as applicable with the standard provisions entitled “Condoms” and “Prohibition on the Promotion or Advocacy of the Legalization or Practice of Prostitution or Sex Trafficking” included in the referenced agreement.”

RFA/APS No. _____

Application No. _____

Date of Application _____

Name of Applicant/Subgrantee _____

Typed Name and Title _____

Signature _____

PART V - SURVEY ON ENSURING EQUAL OPPORTUNITY FOR APPLICANTS

Applicability: All RFA's must include the attached Survey on Ensuring Equal Opportunity for Applicants as an attachment to the RFA package. Applicants under unsolicited applications are also to be provided the survey. (While inclusion of the survey by Agreement Officers in RFA packages is required, the applicant's completion of the survey is voluntary, and must not be a requirement of the RFA. The absence of a completed survey in an application may not be a basis upon which the application is determined incomplete or non-responsive. Applicants who volunteer to complete and submit the survey under a competitive or non-competitive action are instructed within the text of the survey to submit it as part of the application process.)

PART VI - OTHER STATEMENTS OF RECIPIENT

1. AUTHORIZED INDIVIDUALS

The recipient represents that the following persons are authorized to negotiate on its behalf with the Government and to bind the recipient in connection with this application or grant:

Name	Title	Telephone No.	Facsimile No.

2. TAXPAYER IDENTIFICATION NUMBER (TIN)

If the recipient is a U.S. organization, or a foreign organization which has income effectively connected with the conduct of activities in the U.S. or has an office or a place of business or a fiscal paying agent in the U.S., please indicate the recipient's TIN:

TIN: _____

3. DATA UNIVERSAL NUMBERING SYSTEM (DUNS) NUMBER

(a) In the space provided at the end of this provision, the recipient should supply the Data Universal Numbering System (DUNS) number applicable to that name and address. Recipients should take care to

report the number that identifies the recipient's name and address exactly as stated in the proposal.

(b) The DUNS is a 9-digit number assigned by Dun and Bradstreet Information Services. If the recipient does not have a DUNS number, the recipient should call Dun and Bradstreet directly at 1-800-333-0505. A DUNS number will be provided immediately by telephone at no charge to the recipient. The recipient should be prepared to provide the following information:

- (1) Recipient's name.
- (2) Recipient's address.
- (3) Recipient's telephone number.
- (4) Line of business.
- (5) Chief executive officer/key manager.
- (6) Date the organization was started.
- (7) Number of people employed by the recipient.
- (8) Company affiliation.

(c) Recipients located outside the United States may obtain the location and phone number of the local Dun and Bradstreet Information Services office from the Internet Home Page at <http://www.dbisna.com/dbis/customer/custlist.htm>. If an offeror is unable to locate a local service center, it may send an e-mail to Dun and Bradstreet at globalinfo@dbisma.com.

The DUNS system is distinct from the Federal Taxpayer Identification Number (TIN) system.

DUNS: _____

4. LETTER OF CREDIT (LOC) NUMBER

If the recipient has an existing Letter of Credit (LOC) with USAID, please indicate the LOC number:

LOC: _____

5. PROCUREMENT INFORMATION

(a) Applicability. This applies to the procurement of goods and services planned by the recipient (i.e., contracts, purchase orders, etc.) from a supplier of goods or services for the direct use or benefit of the recipient in conducting the program supported by the grant, and not to assistance provided by the recipient (i.e., a subgrant or subagreement) to a subgrantee or subrecipient in support of the subgrantee's or subrecipient's program. Provision by the recipient of the requested information does not, in and of itself, constitute USAID approval.

(b) Amount of Procurement. Please indicate the total estimated dollar amount of goods and services which the recipient plans to purchase under the grant:

\$_____

(c) Nonexpendable Property. If the recipient plans to purchase nonexpendable equipment which would require the approval of the Agreement Officer, please indicate below (using a continuation page, as necessary) the types, quantities of each, and estimated unit costs. Nonexpendable equipment for which the Agreement Officer's approval to purchase is required is any article of nonexpendable tangible personal

property charged directly to the grant, having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit.

TYPE/DESCRIPTION(Generic)	QUANTITY	ESTIMATED UNIT COST
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(d) Source, Origin, and Componentry of Goods. If the recipient plans to purchase any goods/commodities which are not of U.S. source and/or U.S. origin, and/or does not contain at least 50% componentry, which are not at least 50% U.S. source and origin, please indicate below (using a continuation page, as necessary) the types and quantities of each, estimated unit costs of each, and probable source and/or origin, to include the probable source and/or origin of the components if less than 50% U.S. components will be contained in the commodity. "Source" means the country from which a commodity is shipped to the cooperating country or the cooperating country itself if the commodity is located therein at the time of purchase. However, where a commodity is shipped from a free port or bonded warehouse in the form in which received therein, "source" means the country from which the commodity was shipped to the free port or bonded warehouse. Any commodity whose source is a non-Free World country is ineligible for USAID financing. The "origin" of a commodity is the country or area in which a commodity is mined, grown, or produced. A commodity is produced when, through manufacturing, processing, or substantial and major assembling of components, a commercially recognized new commodity results, which is substantially different in basic characteristics or in purpose or utility from its components. Merely packaging various items together for a particular procurement or relabeling items do not constitute production of a commodity. Any commodity whose origin is a non-Free World country is ineligible for USAID financing. "Components" are the goods, which go directly into the production of a produced commodity. Any component from a non-Free World country makes the commodity ineligible for USAID financing.

TYPE/DESCRIPTION PROBABLE (Generic)	QUANTITY	ESTIMATED UNIT COST	GOODS COMPONENTS	PROBABLE SOURCE	GOODS COMPONENTS	ORIGIN
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(e) Restricted Goods. If the recipient plans to purchase any restricted goods, please indicate below (using a continuation page, as necessary) the types and quantities of each, estimated unit costs of each, intended use, and probable source and/or origin. Restricted goods are Agricultural Commodities, Motor Vehicles, Pharmaceuticals, Pesticides, Rubber Compounding Chemicals and Plasticizers, Used Equipment, U.S. Government-Owned Excess Property, and Fertilizer.

TYPE/DESCRIPTION (Generic)	QUANTITY	ESTIMATED UNIT COST	PROBABLE SOURCE	INTENDED ORIGIN	USE
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(f) Supplier Nationality. If the recipient plans to purchase any goods or services from suppliers of goods and services whose nationality is not in the U.S., please indicate below (using a continuation page, as necessary) the types and quantities of each good or service, estimated costs of each, probable nationality of each non-U.S. supplier of each good or service, and the rationale for purchasing from a non-U.S. supplier. Any supplier whose nationality is a non-Free World country is ineligible for USAID financing.

TYPE/DESCRIPTION RATIONALE (Generic)	QUANTITY	ESTIMATED UNIT COST	PROBABLE (Non-US Only)	SLUPPIER for NON-US	NATIONALITY
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(g) Proposed Disposition. If the recipient plans to purchase any nonexpendable equipment with a unit acquisition cost of \$5,000 or more, please indicate below (using a continuation page, as necessary) the proposed disposition of each such item. Generally, the recipient may either retain the property for other uses and make compensation to USAID (computed by applying the percentage of federal participation in the cost of the original program to the current fair market value of the property), or sell the property and reimburse USAID an amount computed by applying to the sales proceeds the percentage of federal participation in the cost of the original program (except that the recipient may deduct from the federal share \$500 or 10% of the proceeds, whichever is greater, for selling and handling expenses), or donate the property to a host country institution, or otherwise dispose of the property as instructed by USAID.

TYPE/DESCRIPTION(Generic)	QUANTITY	ESTIMATED UNIT COST	PROPOSED DISPOSITION
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6. PAST PERFORMANCE REFERENCES

On a continuation page, please provide past performance information requested in the RFA.

7. TYPE OF ORGANIZATION

The recipient, by checking the applicable box, represents that -

(a) If the recipient is a U.S. entity, it operates as ☐ a corporation incorporated under the laws of the State of, ☐ an individual, ☐ a partnership, ☐ a nongovernmental nonprofit organization, ☐ a state or local governmental organization, ☐ a private college or university, ☐ a public college or university, ☐ an international organization, or ☐ a joint venture; or

(b) If the recipient is a non-U.S. entity, it operates as ☐ a corporation organized under the laws of _____ (country), ☐ an individual, ☐ a partnership, ☐ a nongovernmental nonprofit organization, ☐ a nongovernmental educational institution, ☐ a governmental organization, ☐ an international organization, or ☐ a joint venture.

8. ESTIMATED COSTS OF COMMUNICATIONS PRODUCTS

The following are the estimate(s) of the cost of each separate communications product (i.e., any printed material [other than non-color photocopy material], photographic services, or video production services) which is anticipated under the grant. Each estimate must include all the costs associated with preparation and execution of the product. Use a continuation page as necessary.

SECTION E: STANDARD PROVISIONS FOR U.S. Nongovernmental Recipients

U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT

I. MANDATORY STANDARD PROVISIONS FOR U.S. NONGOVERNMENTAL RECIPIENTS

1. APPLICABILITY OF 22 CFR PART 226 (MAY 2005)
2. INELIGIBLE COUNTRIES (MAY 1986)
3. NONDISCRIMINATION (MAY 1986)
4. NONLIABILITY (NOVEMBER 1985)
5. AMENDMENT (NOVEMBER 1985)
6. NOTICES (NOVEMBER 1985)
7. SUBAGREEMENTS (JUNE 1999)
8. OMB APPROVAL UNDER THE PAPERWORK REDUCTION ACT (DECEMBER 2003)
9. USAID ELIGIBILITY RULES FOR GOODS AND SERVICES (APRIL 1998)
- *10. DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS (JANUARY 2004)
- *11. DRUG-FREE WORKPLACE (JANUARY 2004)
- *12. EQUAL PROTECTION OF THE LAWS FOR FAITH-BASED AND COMMUNITY ORGANIZATIONS (FEBRUARY 2004)
- *13. IMPLEMENTATION OF E.O. 13224 -- EXECUTIVE ORDER ON TERRORIST FINANCING (MARCH 2002)
- *14. MARKING UNDER USAID-FUNDED ASSISTANCE INSTRUMENTS (DECEMBER 2005)
15. REGULATIONS GOVERNING EMPLOYEES (AUGUST 1992)
16. CONVERSION OF UNITED STATES DOLLARS TO LOCAL CURRENCY (NOVEMBER 1985)
17. USE OF POUCH FACILITIES (AUGUST 1992)
18. INTERNATIONAL AIR TRAVEL AND TRANSPORTATION (JUNE 1999)
19. OCEAN SHIPMENT OF GOODS (JUNE 1999)
20. LOCAL PROCUREMENT (APRIL 1998)
21. VOLUNTARY POPULATION PLANNING ACTIVITIES – MANDATORY REQUIREMENTS (MAY 2006)

II. REQUIRED AS APPLICABLE STANDARD PROVISIONS FOR U.S., NONGOVERNMENTAL RECIPIENTS

1. NEGOTIATED INDIRECT COST RATES - PREDETERMINED (APRIL 1998)
2. NEGOTIATED INDIRECT COST RATES - PROVISIONAL (Nonprofit) (APRIL 1998)
3. NEGOTIATED INDIRECT COST RATE - PROVISIONAL (Profit) (APRIL 1998)
4. PUBLICATIONS AND MEDIA RELEASES (MARCH 2006)
5. PARTICIPANT TRAINING (APRIL 1998)

6. VOLUNTARY POPULATION PLANNING ACTIVITIES – SUPPLEMENTAL REQUIREMENTS (MAY 2006)
7. PROTECTION OF THE INDIVIDUAL AS A RESEARCH SUBJECT (APRIL 1998)
8. CARE OF LABORATORY ANIMALS (MARCH 2004)
9. TITLE TO AND CARE OF PROPERTY (COOPERATING COUNTRY TITLE) (NOVEMBER 1985)
10. PUBLIC NOTICES (MARCH 2004)
11. (RESERVED)
- *12. COST SHARING (MATCHING) (JULY 2002)
13. PROHIBITION OF ASSISTANCE TO DRUG TRAFFICKERS (JUNE 1999)
- *14. INVESTMENT PROMOTION (NOVEMBER 2003)
- *15. REPORTING OF FOREIGN TAXES (MARCH 2006)
- *16. FOREIGN GOVERNMENT DELEGATIONS TO INTERNATIONAL CONFERENCES (JANUARY 2002)
17. ORGANIZATIONS ELIGIBLE FOR ASSISTANCE (JULY 2004)
18. PROHIBITION ON THE USE OF FEDERAL FUNDS TO PROMOTE, SUPPORT, OR ADVOCATE FOR THE LEGALIZATION OR PRACTICE OF PROSTITUTION - ASSISTANCE (JULY 2004)
- *19. ORGANIZATIONS ELIGIBLE FOR ASSISTANCE (JUNE 2005)
- *20. CONDOMS (JUNE 2005)
- *21. PROHIBITION ON THE PROMOTION OR ADVOCACY OF THE LEGALIZATION OR PRACTICE OF PROSTITUTION OR SEX TRAFFICKING (JUNE 2005)
22. USAID DISABILITY POLICY - ASSISTANCE (DECEMBER 2004)
23. STANDARDS FOR ACCESSIBILITY FOR THE DISABLED IN USAID ASSISTANCE AWARDS INVOLVING CONSTRUCTION (SEPTEMBER 2004)

*An asterisk indicates that the adjacent information is new or substantively revised.

I. MANDATORY STANDARD PROVISIONS FOR US NONGOVERNMENTAL RECIPIENTS

1. APPLICABILITY OF 22 CFR PART 226 (MAY 2005)

(a) All provisions of 22 CFR Part 226 and all Standard Provisions attached to this agreement are applicable to the recipient and to sub recipients which meet the definition of "Recipient" in Part 226, unless a section specifically excludes a sub recipient from coverage. The recipient shall assure that sub recipients have copies of all the attached standard provisions.

(b) For any sub awards made with Non-US sub recipients the Recipient shall include the applicable "Standard Provisions for Non-US Nongovernmental Grantees." Recipients are required to ensure compliance with sub recipient monitoring procedures in accordance with OMB Circular A-133.

(END OF MANDATORY STANDARD PROVISION)

2. INELIGIBLE COUNTRIES (MAY 1986)

Unless otherwise approved by the USAID Agreement Officer, funds will only be expended for assistance to countries eligible for assistance under the Foreign Assistance Act of 1961, as amended, or under acts appropriating funds for foreign assistance.

(END OF MANDATORY STANDARD PROVISION)

3. NONDISCRIMINATION (MAY 1986)

No U.S. citizen or legal resident shall be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity funded by this award on the basis of race, color, national origin, age, handicap, or sex.

(END OF MANDATORY STANDARD PROVISION)

4. NONLIABILITY (NOVEMBER 1985)

USAID does not assume liability for any third party claims for damages arising out of this award.

(END OF MANDATORY STANDARD PROVISION)

5. AMENDMENT (NOVEMBER 1985)

The award may be amended by formal modifications to the basic award document or by means of an exchange of letters between the Agreement Officer and an appropriate official of the recipient.

(END OF MANDATORY STANDARD PROVISION)

6. NOTICES (NOVEMBER 1985)

Any notice given by USAID or the recipient shall be sufficient only if in writing and delivered in person, mailed, or cabled as follows:

To the USAID Agreement Officer, at the address specified in the award.

To recipient, at recipient's address shown in the award or to such other address designated within the award.

Notices shall be effective when delivered in accordance with this provision, or on the effective date of the notice, whichever is later.

(END OF MANDATORY STANDARD PROVISION)

7. SUBAGREEMENTS (JUNE 1999)

Subrecipients, subawardees, and contractors have no relationship with USAID under the terms of this agreement. All required USAID approvals must be directed through the recipient to USAID.

(END OF MANDATORY STANDARD PROVISION)

**8. OMB APPROVAL UNDER THE PAPERWORK REDUCTION ACT
(DECEMBER 2003)**

*Information collection requirements imposed by this grant are covered by OMB approval number 0412-0510; the current expiration date is 04/30/2005. The Standard Provisions containing the requirement and an estimate of the public reporting burden (including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information) are:

<u>Standard Provision</u>	<u>Burden Estimate</u>
Air Travel and Transportation	1.0 (hour)
Ocean Shipment of Goods	.5
Patent Rights	.5
Publications	.5
Negotiated Indirect Cost Rates - (Predetermined and Provisional)	1.0
Voluntary Population Planning	.5
Protection of the Individual as a Research Subject	1.0
<u>22 CFR 226</u>	<u>Burden Estimate</u>
22 CFR 226.40-.49 Procurement of Goods and Services	1.0
22 CFR 226.30 - .36 Property Standards	1.5

Comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, may be sent to the Office of Procurement, Policy Division (M/OP/P) U.S. Agency for International Development, Washington, DC 20523-7801 and to the Office of Management and Budget, Paperwork Reduction Project (0412-0510), Washington, D.C 20503.

(END OF MANDATORY STANDARD PROVISION)

9. USAID ELIGIBILITY RULES FOR GOODS AND SERVICES (APRIL 1998)

(This provision is not applicable to goods or services which the recipient provides with private funds as part of a cost-sharing requirement, or with Program Income generated under the award.)

a. Ineligible and Restricted Goods and Services: USAID's policy on ineligible and restricted goods and services is contained in ADS Chapter 312.

- (1) Ineligible Goods and Services. Under no circumstances shall the recipient procure any of the following under this award:
 - (i) Military equipment,
 - (ii) Surveillance equipment,
 - (iii) Commodities and services for support of police or other law enforcement activities,
 - (iv) Abortion equipment and services,
 - (v) Luxury goods and gambling equipment, or
 - (vi) Weather modification equipment.
- (2) Ineligible Suppliers. Funds provided under this award shall not be used to procure any goods or services furnished by any firms or individuals whose name appears on the "Lists of Parties Excluded from Federal Procurement and Nonprocurement Programs." USAID will provide the recipient with a copy of these lists upon request.
- (3) Restricted Goods. The recipient shall not procure any of the following goods and services without the prior approval of the Agreement Officer:
 - (i) Agricultural commodities,
 - (ii) Motor vehicles,
 - (iii) Pharmaceuticals,
 - (iv) Pesticides,
 - (v) Used equipment,
 - (vi) U.S. Government-owned excess property, or
 - (vii) Fertilizer.

Prior approval will be deemed to have been met when:

- (i) the item is of U.S. source/origin;
- (ii) the item has been identified and incorporated in the program description or schedule of the award (initial or revisions), or amendments to the award; and
- (iii) the costs related to the item are incorporated in the approved budget of the award.

Where the item has not been incorporated into the award as described above, a separate written authorization from the Agreement Officer must be provided before the item is procured.

b. Source and Nationality: The eligibility rules for goods and services based on source and nationality are divided into two categories. One applies when the total procurement element during the life of the award is over \$250,000, and the other applies when the total procurement element during the life of the award is not over \$250,000, or the award is funded under the Development Fund for Africa (DFA) regardless of the amount. The total procurement element includes procurement of all goods (e.g., equipment, materials, supplies) and services. Guidance on the eligibility of specific goods or services may be obtained from the

Agreement Officer. USAID policies and definitions on source, origin and nationality are contained in 22 CFR Part 228, Rules on Source, Origin and Nationality for Commodities and Services Financed by the Agency for International Development, which is incorporated into this Award in its entirety.

- (1) For DFA funded awards or when the total procurement element during the life of this award is valued at \$250,000 or less, the following rules apply:
 - (i) The authorized source for procurement of all goods and services to be reimbursed under the award is USAID Geographic Code 935, "Special Free World," and such goods and services must meet the source, origin and nationality requirements set forth in 22 CFR Part 228 in accordance with the following order of preference:
 - (A) The United States (USAID Geographic Code 000),
 - (B) The Cooperating Country,
 - (C) USAID Geographic Code 941, and
 - (D) USAID Geographic Code 935.
 - (ii) Application of order of preference: When the recipient procures goods and services from other than U.S. sources, under the order of preference in paragraph (b)(1)(i) above, the recipient shall document its files to justify each such instance. The documentation shall set forth the circumstances surrounding the procurement and shall be based on one or more of the following reasons, which will be set forth in the grantee's documentation:
 - (A) The procurement was of an emergency nature, which would not allow for the delay attendant to soliciting U.S. sources,
 - (B) The price differential for procurement from U.S. sources exceeded by 50% or more the delivered price from the non-U.S. source,
 - (C) Compelling local political considerations precluded consideration of U.S. sources,
 - (D) The goods or services were not available from U.S. sources, or
 - (E) Procurement of locally available goods and services, as opposed to procurement of U.S. goods and services, would best promote the objectives of the Foreign Assistance program under the award.
- (2) When the total procurement element exceeds \$250,000 (unless funded by DFA), the following applies: Except as may be specifically approved or directed in advance by the Agreement Officer, all goods and services financed with U.S. dollars, which will be reimbursed under this award must meet the source, origin and nationality requirements set forth in 22 CFR Part 228 for the authorized geographic code specified in the schedule of this award. If none is specified, the authorized source is Code 000, the United States.

c. Printed or Audio-Visual Teaching Materials: If the effective use of printed or audio-visual teaching materials depends upon their being in the local language and if such materials are intended for technical assistance projects or activities financed by USAID in whole or in part and if other funds including U.S.-

owned or U.S.-controlled local currencies are not readily available to finance the procurement of such materials, local language versions may be procured from the following sources, in order of preference:

- (1) The United States (USAID Geographic Code 000),
- (2) The Cooperating Country,
- (3) "Selected Free World" countries (USAID Geographic Code 941), and
- (4) "Special Free World" countries (USAID Geographic Code 899).

d. If USAID determines that the recipient has procured any of these goods or services under this award contrary to the requirements of this provision, and has received payment for such purposes, the Agreement Officer may require the recipient to refund the entire amount of the purchase. This provision must be included in all subagreements which include procurement of goods or services which total over \$5,000.

(END OF MANDATORY STANDARD PROVISION)

***10. DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS (JANUARY 2004)**

a. The recipient agrees to notify the Agreement Officer immediately upon learning that it or any of its principals:

(1) Are presently excluded or disqualified from covered transactions by any Federal department or agency;

(2) Have been convicted within the preceding three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, tax evasion, receiving stolen property, making false claims, or obstruction of justice; commission of any other offense indicating a lack of business integrity or business honesty that seriously and directly affects your present responsibility;

(3) Are presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b); and

(4) Have had one or more public transactions (Federal, State, or local) terminated for cause or default within the preceding three years. b. The recipient agrees that, unless authorized by the Agreement Officer, it will not knowingly enter into any subagreements or contracts under this grant with a person or entity that is included on the Excluded Parties List System (<http://epls.arnet.gov>). The recipient further agrees to include the following provision in any subagreements or contracts entered into under this award:

DEBARMENT, SUSPENSION, INELIGIBILITY, AND VOLUNTARY EXCLUSION (DECEMBER 2003)

The recipient/contractor certifies that neither it nor its principals is presently excluded or disqualified from participation in this transaction by any Federal department or agency.

b. The policies and procedures applicable to debarment, suspension, and ineligibility under USAID-financed transactions are set forth in 22 CFR Part 208.

(END OF MANDATORY STANDARD PROVISION)

***11. DRUG-FREE WORKPLACE (JANUARY 2004)**

- a. The recipient agrees that it will publish a drug-free workplace statement and provide a copy to each employee who will be engaged in the performance of any Federal award.
The statement must:
- (1) Tell the employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in its workplace;
 - (2) Specify the actions the recipient will take against employees for violating that prohibition; and
 - (3) Let each employee know that, as a condition of employment under any award, he or she
 - (i) Must abide by the terms of the statement, and
 - (ii) Must notify you in writing if he or she is convicted for a violation of a criminal drug statute occurring in the workplace, and must do so no more than five calendar days after the conviction.
- b. The recipient agrees that it will establish an ongoing drug-free awareness program to inform employees about:
- (i) The dangers of drug abuse in the workplace;
 - (ii) Your policy of maintaining a drug-free workplace;
 - (iii) Any available drug counseling, rehabilitation and employee assistance programs; and
 - (iv) The penalties that you may impose upon them for drug abuse violations occurring in the workplace.
- c. Without the Agreement Officer's expressed written approval, the policy statement and program must be in place as soon as possible, no later than the 30 days after the effective date of this award or the completion date of this award, whichever occurs first.
- d. The recipient agrees to immediately notify the Agreement Officer if an employee is convicted of a drug violation in the workplace. The notification must be in writing, identify the employee's position title, the number of each award on which the employee worked. The notification must be sent to the Agreement Officer within ten calendar days after the recipient learns of the conviction.
- e. Within 30 calendar days of learning about an employee's conviction, the recipient must either
- (1) Take appropriate personnel action against the employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973 (29 USC 794), as amended, or
 - (2) Require the employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for these purposes by a Federal, State or local health, law enforcement, or other appropriate agency.
- f. The policies and procedures applicable to violations of these requirements are set forth in 22 CFR Part 210.

(END OF MANDATORY STANDARD PROVISION)

***12. EQUAL PROTECTION OF THE LAWS FOR FAITH-BASED AND COMMUNITY ORGANIZATIONS (FEBRUARY 2004)**

- a. The recipient may not discriminate against any beneficiary or potential beneficiary under this award on the basis of religion or religious belief. Accordingly, in providing services supported in whole or in part by this agreement or in its outreach activities related to such services, the recipient may not discriminate against current or prospective program beneficiaries on the basis of religion, a religious belief, a refusal to hold a religious belief, or a refusal to actively participate in a religious practice;
- b. The Federal Government must implement Federal programs in accordance with the Establishment Clause and the Free Exercise Clause of the First Amendment to the Constitution. Therefore, if the recipient engages in inherently religious activities, such as worship, religious instruction, and proselytization, it must offer those services at a different time or location from any programs or services directly funded by this award, and participation by beneficiaries in any such inherently religious activities must be voluntary.
- c. If the recipient makes subawards under this agreement, faith-based organizations should be eligible to participate on the same basis as other organizations, and should not be discriminated against on the basis of their religious character or affiliation.

(END OF MANDATORY STANDARD PROVISION)

***13. IMPLEMENTATION OF E.O. 13224 -- EXECUTIVE ORDER ON TERRORIST FINANCING (MARCH 2002)**

The Recipient is reminded that U.S. Executive Orders and U.S. law prohibits transactions with, and the provision of resources and support to, individuals and organizations associated with terrorism. It is the legal responsibility of the recipient to ensure compliance with these Executive Orders and laws. This provision must be included in all contracts/subawards issued under this agreement.

(END OF MANDATORY STANDARD PROVISION)

***14. MARKING UNDER ASSISTANCE INSTRUMENTS (DEC 2005)**

(a) Definitions

Commodities mean any material, article, supply, goods or equipment, excluding recipient offices, vehicles, and non-deliverable items for recipient's internal use, in administration of the USAID funded grant, cooperative agreement, or other agreement or subagreement.

Principal Officer means the most senior officer in a USAID Operating Unit in the field, e.g., USAID Mission Director or USAID Representative. For global programs managed from Washington but executed across many countries, such as disaster relief and assistance to internally displaced persons, humanitarian emergencies or immediate post conflict and political crisis response, the cognizant Principal Officer may be an Office Director, for example, the Directors of USAID/W/Office of Foreign Disaster Assistance and Office of Transition Initiatives. For non-presence countries, the cognizant Principal Officer is the Senior USAID officer in a regional USAID Operating Unit responsible for the non-presence country, or in the absence of

such a responsible operating unit, the Principal U.S Diplomatic Officer in the non-presence country exercising delegated authority from USAID.

Programs mean an organized set of activities and allocation of resources directed toward a common purpose, objective, or goal undertaken or proposed by an organization to carry out the responsibilities assigned to it.

Projects include all the marginal costs of inputs (including the proposed investment) technically required to produce a discrete marketable output or a desired result (for example, services from a fully functional water/sewage treatment facility).

Public communications are documents and messages intended for distribution to audiences external to the recipient's organization. They include, but are not limited to, correspondence, publications, studies, reports, audio visual productions, and other informational products; applications, forms, press and promotional materials used in connection with USAID funded programs, projects or activities, including signage and plaques; Web sites/Internet activities; and events such as training courses, conferences, seminars, press conferences and so forth.

Subrecipient means any person or government (including cooperating country government) department, agency, establishment, or for profit or nonprofit organization that receives a USAID subaward, as defined in 22 C.F.R. 226.2.

Technical Assistance means the provision of funds, goods, services, or other foreign assistance, such as loan guarantees or food for work, to developing countries and other USAID recipients, and through such recipients to subrecipients, in direct support of a development objective – as opposed to the internal management of the foreign assistance program.

USAID Identity (Identity) means the official marking for the United States Agency for International Development (USAID), comprised of the USAID logo or seal and new brandmark, with the tagline that clearly communicates that our assistance is “from the American people.” The USAID Identity is available on the USAID website at www.usaid.gov/branding and USAID provides it without royalty, license, or other fee to recipients of USAID-funded grants, or cooperative agreements, or other assistance awards

(b) Marking of Program Deliverables

(1) All recipients must mark appropriately all overseas programs, projects, activities, public communications, and commodities partially or fully funded by a USAID grant or cooperative agreement or other assistance award or subaward with the USAID Identity, of a size and prominence equivalent to or greater than the recipient's, other donor's, or any other third party's identity or logo.

(2) The Recipient will mark all program, project, or activity sites funded by USAID, including visible infrastructure projects (for example, roads, bridges, buildings) or other programs, projects, or activities that are physical in nature (for example, agriculture, forestry, water management) with the USAID Identity. The Recipient should erect temporary signs or plaques early in the construction or implementation phase. When construction or implementation is complete, the Recipient must install a permanent, durable sign, plaque or other marking.

(3) The Recipient will mark technical assistance, studies, reports, papers, publications, audio-visual productions, public service announcements, Web sites/Internet activities and other promotional, informational, media, or communications products funded by USAID with the USAID Identity.

(4) The Recipient will appropriately mark events financed by USAID, such as training courses, conferences, seminars, exhibitions, fairs, workshops, press conferences and other public activities, with the USAID Identity. Unless directly prohibited and as appropriate to the surroundings, recipients should display additional materials, such as signs and banners, with the USAID Identity. In circumstances in which the USAID Identity cannot be displayed visually, the recipient is encouraged otherwise to acknowledge USAID and the American people's support.

(5) The Recipient will mark all commodities financed by USAID, including commodities or equipment provided under humanitarian assistance or disaster relief programs, and all other equipment, supplies, and other materials funded by USAID, and their export packaging with the USAID Identity.

(6) The Agreement Officer may require the USAID Identity to be larger and more prominent if it is the majority donor, or to require that a cooperating country government's identity be larger and more prominent if circumstances warrant, and as appropriate depending on the audience, program goals, and materials produced.

(7) The Agreement Officer may require marking with the USAID Identity in the event that the recipient does not choose to mark with its own identity or logo.

(8) The Agreement Officer may require a pre-production review of USAID funded public communications and program materials for compliance with the approved Marking Plan.

(9) Subrecipients. To ensure that the marking requirements "flow down" to subrecipients of subawards, recipients of USAID funded grants and cooperative agreements or other assistance awards will include the USAID-approved marking provision in any USAID funded subaward, as follows:

"As a condition of receipt of this subaward, marking with the USAID Identity of a size and prominence equivalent to or greater than the recipient's, subrecipient's, other donor's or third party's is required. In the event the recipient chooses not to require marking with its own identity or logo by the subrecipient, USAID may, at its discretion, require marking by the subrecipient with the USAID Identity."

(10) Any 'public communications', as defined in 22 C.F.R. 226.2, funded by USAID, in which the content has not been approved by USAID, must contain the following disclaimer:

"This study/report/audio/visual/other information/media product (specify) is made possible by the generous support of the American people through the United States Agency for International Development (USAID). The contents are the responsibility of [insert recipient name] and do not necessarily reflect the views of USAID or the United States Government."

(11) The recipient will provide the Cognizant Technical Officer (CTO) or other USAID personnel designated in the grant or cooperative agreement with two copies of all program and communications materials produced under the award. In addition, the recipient will submit one electronic or one hard copy of all final documents to USAID's Development Experience Clearinghouse.

(c) Implementation of marking requirements.

(1) When the grant or cooperative agreement contains an approved Marking Plan, the recipient will implement the requirements of this provision following the approved Marking Plan.

(2) When the grant or cooperative agreement does not contain an approved Marking Plan, the recipient will propose and submit a plan for implementing the requirements of this provision within [*Agreement Officer fill-in*] days after the effective date of this provision. The plan will include:

- (i) A description of the program deliverables specified in paragraph (b) of this provision that the recipient will produce as a part of the grant or cooperative agreement and which will visibly bear the USAID Identity.
- (ii) the type of marking and what materials the applicant uses to mark the program deliverables with the USAID Identity,
- (iii) when in the performance period the applicant will mark the program deliverables, and where the applicant will place the marking,

(3) The recipient may request program deliverables not be marked with the USAID Identity by identifying the program deliverables and providing a rationale for not marking these program deliverables. Program deliverables may be exempted from USAID marking requirements when:

- (i) USAID marking requirements would compromise the intrinsic independence or neutrality of a program or materials where independence or neutrality is an inherent aspect of the program and materials;
- (ii) USAID marking requirements would diminish the credibility of audits, reports, analyses, studies, or policy recommendations whose data or findings must be seen as independent;
- (iii) USAID marking requirements would undercut host-country government “ownership” of constitutions, laws, regulations, policies, studies, assessments, reports, publications, surveys or audits, public service announcements, or other communications better positioned as “by” or “from” a cooperating country ministry or government official;
- (iv) USAID marking requirements would impair the functionality of an item;
- (v) USAID marking requirements would incur substantial costs or be impractical;
- (vi) USAID marking requirements would offend local cultural or social norms, or be considered inappropriate;
- (vii) USAID marking requirements would conflict with international law.

(4) The proposed plan for implementing the requirements of this provision, including any proposed exemptions, will be negotiated within the time specified by the Agreement Officer after receipt of the proposed plan. Failure to negotiate an approved plan with the time specified by the Agreement Officer may be considered as noncompliance with the requirements of this provision.

(d) Waivers.

(1) The recipient may request a waiver of the Marking Plan or of the marking requirements of this provision, in whole or in part, for each program, project, activity, public communication or commodity, or, in

exceptional circumstances, for a region or country, when USAID required marking would pose compelling political, safety, or security concerns, or when marking would have an adverse impact in the cooperating country. The recipient will submit the request through the Cognizant Technical Officer. The Principal Officer is responsible for approvals or disapprovals of waiver requests.

(2) The request will describe the compelling political, safety, security concerns, or adverse impact that require a waiver, detail the circumstances and rationale for the waiver, detail the specific requirements to be waived, the specific portion of the Marking Plan to be waived, or specific marking to be waived, and include a description of how program materials will be marked (if at all) if the USAID Identity is removed. The request should also provide a rationale for any use of recipient's own identity/logo or that of a third party on materials that will be subject to the waiver.

(3) Approved waivers are not limited in duration but are subject to Principal Officer review at any time, due to changed circumstances.

(4) Approved waivers "flow down" to recipients of subawards unless specified otherwise. The waiver may also include the removal of USAID markings already affixed, if circumstances warrant.

(5) Determinations regarding waiver requests are subject to appeal to the Principal Officer's cognizant Assistant Administrator. The recipient may appeal by submitting a written request to reconsider the Principal Officer's waiver determination to the cognizant Assistant Administrator.

(e) **Non-retroactivity.** The requirements of this provision do not apply to any materials, events, or commodities produced prior to January 2, 2006. The requirements of this provision do not apply to program, project, or activity sites funded by USAID, including visible infrastructure projects (for example, roads, bridges, buildings) or other programs, projects, or activities that are physical in nature (for example, agriculture, forestry, water management) where the construction and implementation of these are complete prior to January 2, 2006 and the period of the grant does not extend past January 2, 2006.

(END OF MANDATORY STANDARD PROVISION)

15. REGULATIONS GOVERNING EMPLOYEES (AUGUST 1992)

(The following applies to the recipient's employees working in the cooperating country under the agreement who are not citizens of the cooperating country.)

- a. The recipient's employees shall maintain private status and may not rely on local U.S. Government offices or facilities for support while under this grant.
- b. The sale of personal property or automobiles by recipient employees and their dependents in the foreign country to which they are assigned shall be subject to the same limitations and prohibitions which apply to direct-hire USAID personnel employed by the Mission, including the rules contained in 22 CFR Part 136, except as this may conflict with host government regulations.
- c. Other than work to be performed under this award for which an employee is assigned by the recipient, no employee of the recipient shall engage directly or indirectly, either in the individual's own name or in the name or through an agency of another person, in any business, profession, or occupation in the foreign countries to which the individual is assigned, nor shall the individual make loans or investments to or in any business, profession or occupation in the foreign countries to which the individual is assigned.

d. The recipient's employees, while in a foreign country, are expected to show respect for its conventions, customs, and institutions, to abide by its applicable laws and regulations, and not to interfere in its internal political affairs.

e. In the event the conduct of any recipient employee is not in accordance with the preceding paragraphs, the recipient's chief of party shall consult with the USAID Mission Director and the employee involved and shall recommend to the recipient a course of action with regard to such employee.

f. The parties recognize the rights of the U.S. Ambassador to direct the removal from a country of any U.S. citizen or the discharge from this grant award of any third country national when, in the discretion of the Ambassador, the interests of the United States so require.

g. If it is determined, either under (e) or (f) above, that the services of such employee should be terminated, the recipient shall use its best efforts to cause the return of such employee to the United States, or point of origin, as appropriate.

(END OF MANDATORY STANDARD PROVISION)

16. CONVERSION OF UNITED STATES DOLLARS TO LOCAL CURRENCY (NOVEMBER 1985)

(This provision applies when activities are undertaken outside the United States.)

Upon arrival in the Cooperating Country, and from time to time as appropriate, the recipient's chief of party shall consult with the Mission Director who shall provide, in writing, the procedure the recipient and its employees shall follow in the conversion of United States dollars to local currency. This may include, but is not limited to, the conversion of currency through the cognizant United States Disbursing Officer or Mission Controller, as appropriate.

(END OF MANDATORY STANDARD PROVISION)

17. USE OF POUCH FACILITIES (AUGUST 1992)

(This provision applies when activities are undertaken outside the United States.)

a. Use of diplomatic pouch is controlled by the Department of State. The Department of State has authorized the use of pouch facilities for USAID recipients and their employees as a general policy, as detailed in items (1) through (6) below. However, the final decision regarding use of pouch facilities rest with the Embassy or USAID Mission. In consideration of the use of pouch facilities, the recipient and its employees agree to indemnify and hold harmless, the Department of State and USAID for loss or damage occurring in pouch transmission:

(1) Recipients and their employees are authorized use of the pouch for transmission and receipt of up to a maximum of .9 kgs per shipment of correspondence and documents needed in the administration of assistance programs.

(2) U.S. citizen employees are authorized use of the pouch for personal mail up to a maximum of .45 kgs per shipment (but see (a)(3) below).

(3) Merchandise, parcels, magazines, or newspapers are not considered to be personal mail for purposes of this standard provision and are not authorized to be sent or received by pouch.

(4) Official and personal mail pursuant to a.1. and 2. above sent by pouch should be addressed as follows:

Name of individual or organization (followed by letter symbol "G")
 City Name of post (USAID/_____)
 Agency for International Development
 Washington, D.C. 20523-0001

(5) Mail sent via the diplomatic pouch may not be in violation of U.S. Postal laws and may not contain material ineligible for pouch transmission.

(6) Recipient personnel are NOT authorized use of military postal facilities (APO/FPO). This is an Adjutant General's decision based on existing laws and regulations governing military postal facilities and is being enforced worldwide.

- b. The recipient shall be responsible for advising its employees of this authorization, these guidelines, and limitations on use of pouch facilities.
- c. Specific additional guidance on grantee use of pouch facilities in accordance with this standard provision is available from the Post Communication Center at the Embassy or USAID Mission.

(END OF MANDATORY STANDARD PROVISION)

18. INTERNATIONAL AIR TRAVEL AND TRANSPORTATION (JUNE 1999)

(This provision is applicable when costs for international travel or transportation will be paid for with USAID funds. This provision is not applicable if the recipient is providing for travel with private funds as part of a cost-sharing requirement, or with Program Income generated under the award.)

- a. **PRIOR BUDGET APPROVAL**
 In accordance with OMB Cost Principles, direct charges for foreign travel costs are allowable only when each foreign trip has received prior budget approval. Such approval will be deemed to have been met when:
 - (1) the trip is identified. Identification is accomplished by providing the following information: the number of trips, the number of individuals per trip, and the destination country(s).
 - (2) the information noted at (a)(1) above is incorporated in: the proposal, the program description or schedule of the award, the implementation plan (initial or revisions), or amendments to the award; and
 - (3) the costs related to the travel are incorporated in the approved budget of the award.

The Agreement Officer may approve travel which has not been incorporated in writing as required by paragraph (a)(2). In such case, a copy of the Agreement Officer's approval must be included in the agreement file.

- b. **NOTIFICATION**

(1) As long as prior budget approval has been met in accordance with paragraph (a) above, a separate Notification will not be necessary unless:

- (i) the primary purpose of the trip is to work with USAID Mission personnel, or
- (ii) the recipient expects significant administrative or substantive programmatic support from the Mission. Neither the USAID Mission nor the Embassy will require Country Clearance of employees or contractors of USAID Recipients.

(2) Recipient will observe the following standards:

- (i) Send a written notice to the cognizant USAID Technical Office in the Mission. If the recipient's primary point of contact is a Technical Officer in USAID/W, the recipient may send the notice to that person. It will be the responsibility of the USAID/W Technical Officer to forward the notice to the field.
- (ii) The notice should be sent as far in advance as possible, but at least 14 calendar days in advance of the proposed travel. This notice may be sent by fax or e-mail. The recipient should retain proof that notification was made.
- (iii) The notification shall contain the following information: the award number, the cognizant Technical Officer, the traveler's name (if known), date of arrival, and the purpose of the trip.
- (iv) The USAID Mission will respond only if travel has been denied. It will be the responsibility of the Technical Officer in the Mission to contact the recipient within 5 working days of having received the notice if the travel is denied. If the recipient has not received a response within the time frame, the recipient will be considered to have met these standards for notification, and may travel.
- (v) If a subrecipient is required to issue a Notification, as per this section, the subrecipient may contact the USAID Technical Officer directly, or the prime may contact USAID on the subrecipient's behalf.

c. SECURITY ISSUES

Recipients are encouraged to obtain the latest Department of State Travel Advisory Notices before travelling. These Notices are available to the general public and may be obtained directly from the State Department, or via Internet.

Where security is a concern in a specific region, recipients may choose to notify the US Embassy of their presence when they have entered the country. This may be especially important for long-term posting.

d. USE OF U.S.-OWNED LOCAL CURRENCY

Travel to certain countries shall, at USAID's option, be funded from U.S.-owned local currency. When USAID intends to exercise this option, USAID will either issue a U.S. Government S.F. 1169,

Transportation Request (GTR) which the grantee may exchange for tickets, or issue the tickets directly. Use of such U.S.-owned currencies will constitute a dollar charge to this grant.

e. **THE FLY AMERICA ACT**

The Fly America Act (49 U.S.C. 40118) requires that all air travel and shipments under this award must be made on U.S. flag air carriers to the extent service by such carriers is available. The Administrator of General Services Administration (GSA) is authorized to issue regulations for purposes of implementation. Those regulations may be found at 41 CFR part 301, and are hereby incorporated by reference into this award.

f. **COST PRINCIPLES**

The recipient will be reimbursed for travel and the reasonable cost of subsistence, post differentials and other allowances paid to employees in international travel status in accordance with the recipient's applicable cost principles and established policies and practices which are uniformly applied to federally financed and other activities of the grantee.

If the recipient does not have written established policies regarding travel costs, the standard for determining the reasonableness of reimbursement for overseas allowance will be the Standardized Regulations (Government Civilians, Foreign Areas), published by the U.S. Department of State, as from time to time amended. The most current subsistence, post differentials, and other allowances may be obtained from the Agreement Officer.

g. **SUBAWARDS.**

This provision will be included in all subawards and contracts which require international air travel and transportation under this award.

(END OF MANDATORY STANDARD PROVISION)

19. OCEAN SHIPMENT OF GOODS (JUNE 1999)

(This provision is applicable for awards and subawards for \$100,000 or more and when goods purchased with funds provided under this award are transported to cooperating countries on ocean vessels whether or not award funds are used for the transportation.)

a. At least 50% of the gross tonnage of all goods purchased under this agreement and transported to the cooperating countries shall be made on privately owned U.S. flag commercial ocean vessels, to the extent such vessels are available at fair and reasonable rates for such vessels.

b. At least 50% of the gross freight revenue generated by shipments of goods purchased under this agreement and transported to the cooperating countries on dry cargo liners shall be paid to or for the benefit of privately owned U.S. flag commercial ocean vessels to the extent such vessels are available at fair and reasonable rates for such vessels.

c. When U.S. flag vessels are not available, or their use would result in a significant delay, the grantee may request a determination of non-availability from the USAID Transportation Division, Office of Procurement, Washington, D.C. 20523, giving the basis for the request which will relieve the grantee of the requirement to use U.S. flag vessels for the amount of tonnage included in the determination. Shipments made on non-free world ocean vessels are not reimbursable under this grant.

d. The recipient shall send a copy of each ocean bill of lading, stating all of the carrier's charges including the basis for calculation such as weight or cubic measurement, covering a shipment under this agreement to:

U.S. Department of Transportation,
Maritime Administration, Division of National Cargo,
400 7th Street, S.W.,
Washington, DC 20590, and

U.S. Agency for International Development,
Office of Procurement, Transportation Division
1300 Pennsylvania Avenue, N.W.
Washington, DC 20523-7900

e. Shipments by voluntary nonprofit relief agencies (i.e., PVOs/NGOs) shall be governed by this standard provision and by USAID Regulation 2, "Overseas Shipments of Supplies by Voluntary Nonprofit Relief Agencies" (22 CFR Part 202).

f. Shipments financed under this grant must meet applicable eligibility requirements set out in 22 CFR 228.21.

(END OF STANDARD PROVISION)

20. LOCAL PROCUREMENT (APRIL 1998)

(This provision applies when activities are undertaken outside the United States.)

a. Financing local procurement involves the use of appropriated funds to finance the procurement of goods and services supplied by local businesses, dealers or producers, with payment normally being in the currency of the cooperating country.

b. Locally financed procurements must be covered by source and nationality waivers as set forth in 22 CFR 228, Subpart F, except as provided for in mandatory standard provision, "USAID Eligibility Rules for Goods and Services," or when one of the following exceptions applies:

- (1) Locally available commodities of U.S. origin, which are otherwise eligible for financing, if the value of the transaction is estimated not to exceed \$100,000 exclusive of transportation costs.
- (2) Commodities of geographic code 935 origin if the value of the transaction does not exceed the local currency equivalent of \$5,000.
- (3) Professional Services Contracts estimated not to exceed \$250,000.
- (4) Construction Services Contracts estimated not to exceed \$5,000,000.
- (5) Commodities and services available only in the local economy (no specific per transaction value applies to this category). This category includes the following items:
 - (i) Utilities including fuel for heating and cooking, waste disposal and

trash collection;

- (ii) Communications - telephone, telex, fax, postal and courier services;
 - (iii) Rental costs for housing and office space;
 - (iv) Petroleum, oils and lubricants for operating vehicles and equipment;
 - (v) Newspapers, periodicals and books published in the cooperating country;
 - (vi) Other commodities and services and related expenses that, by their nature or as a practical matter, can only be acquired, performed, or incurred in the cooperating country, e.g., vehicle maintenance, hotel accommodations, etc.
- c. The coverage on ineligible and restricted goods and services in the mandatory standard provision entitled, "USAID Eligibility Rules for Goods and Services," also apply to local procurement.
- d. This provision will be included in all subagreements where local procurement of goods or services is a supported element.

(END OF MANDATORY STANDARD PROVISION)

**21. VOLUNTARY POPULATION PLANNING ACTIVITIES –
MANDATORY REQUIREMENTS (MAY 2006)**

Requirements for Voluntary Sterilization Programs

- (1) None of the funds made available under this award shall be used to pay for the performance of involuntary sterilization as a method of family planning or to coerce or provide any financial incentive to any individual to practice sterilization.

Prohibition on Abortion-Related Activities:

- (1) No funds made available under this award will be used to finance, support, or be attributed to the following activities: (i) procurement or distribution of equipment intended to be used for the purpose of inducing abortions as a method of family planning; (ii) special fees or incentives to any person to coerce or motivate them to have abortions; (iii) payments to persons to perform abortions or to solicit persons to undergo abortions; (iv) information, education, training, or communication programs that seek to promote abortion as a method of family planning; and (v) lobbying for or against abortion. The term "motivate", as it relates to family planning assistance, shall not be construed to prohibit the provision, consistent with local law, of information or counseling about all pregnancy options.
- (2) No funds made available under this award will be used to pay for any biomedical research which relates, in whole or in part, to methods of, or the performance of, abortions or involuntary sterilizations as a means of family planning.

Epidemiologic or descriptive research to assess the incidence, extent or consequences of abortions is not precluded.

[END OF MANDATORY STANDARD PROVISIONS]

II. REQUIRED AS APPLICABLE STANDARD PROVISIONS FOR U.S., NONGOVERNMENTAL RECIPIENTS

1. NEGOTIATED INDIRECT COST RATES - PREDETERMINED (APRIL 1998)

APPLICABILITY: This provision is applicable to educational or nonprofit institutions whose indirect cost rates under this award are on a predetermined basis.

NEGOTIATED INDIRECT COST RATES – PREDETERMINED (APRIL 1998)

- a. The allowable indirect costs shall be determined by applying the predetermined indirect cost rates to the bases specified in the schedule of this award.
- b. Within the earlier of 30 days after receipt of the A-133 audit report or nine months after the end of the audit period, the recipient shall submit to the cognizant agency for audit the required OMB Circular A-133 audit report, proposed predetermined indirect cost rates, and supporting cost data. If USAID is the cognizant agency or no cognizant agency has been designated, the recipient shall submit four copies of the audit report, the proposed predetermined indirect cost rates, and supporting cost data to the Overhead, Special Costs, and Closeout Branch, Office of Procurement, USAID, Washington DC 20523-7802. The proposed rates shall be based on the recipient's actual cost experience during that fiscal year. Negotiations of predetermined indirect cost rates shall begin soon after receipt of the recipient's proposal.
- c. Allowability of costs and acceptability of cost allocation methods shall be determined in accordance with the applicable cost principles.
- d. The results of each negotiation shall be set forth in an indirect cost rate agreement signed by both parties. Such agreement is automatically incorporated into this award and shall specify (1) the agreed upon predetermined rates, (2) the bases to which the rates apply, (3) the fiscal year for which the rates apply, and (4) the specific items treated as direct costs. The indirect cost rate agreement shall not change any monetary ceiling, award obligation, or specific cost allowance or disallowance provided for in this award.
- e. Pending establishment of predetermined indirect costs rates for any fiscal year, the recipient shall be reimbursed either at the rates fixed for the previous fiscal year or at billing rates acceptable to the USAID Agreement Officer, subject to appropriate adjustment when the final rates for the fiscal year or other period are established.

(END OF PROVISION)

2. NEGOTIATED INDIRECT COST RATES - PROVISIONAL (NONPROFIT) (APRIL 1998)

APPLICABILITY: This provision is applicable to any nonprofit organizations whose indirect cost rates under this award are on a provisional basis.

NEGOTIATED INDIRECT COST RATES - PROVISIONAL (NONPROFIT)

(APRIL 1998)

- a. Provisional indirect cost rates shall be established for each of the recipient's accounting periods during the term of this award. Pending establishment of revised provisional or final rates, allowable indirect costs shall be reimbursed at the rates, on the bases, and for the periods shown in the schedule of the award.
- b. Within the earlier of 30 days after receipt of the A-133 audit report or nine months after the end of the audit period, the recipient shall submit to the cognizant agency for audit the required OMB Circular A-133 audit report, proposed final indirect cost rates, and supporting cost data. If USAID is the cognizant agency or no cognizant agency has been designated, the recipient shall submit four copies of the audit report, along with the proposed final indirect cost rates and supporting cost data, to the Overhead, Special Costs, and Closeout Branch, Office of Procurement, USAID, Washington, DC 20523-7802. The proposed rates shall be based on the recipient's actual cost experience during that fiscal year. Negotiations of final indirect cost rates shall begin soon after receipt of the recipient's proposal.
- c. Allowability of costs and acceptability of cost allocation methods shall be determined in accordance with the applicable cost principles.
- d. The results of each negotiation shall be set forth in a written indirect cost rate agreement signed by both parties. Such agreement is automatically incorporated into this award and shall specify (1) the agreed upon final rates, (2) the bases to which the rates apply, (3) the fiscal year for which the rates apply, and (4) the items treated as direct costs. The agreement shall not change any monetary ceiling, award obligation, or specific cost allowance or disallowance provided for in this award.
- e. Pending establishment of final indirect cost rate(s) for any fiscal year, the recipient shall be reimbursed either at negotiated provisional rates or at billing rates acceptable to the Agreement Officer, subject to appropriate adjustment when the final rates for the fiscal year are established. To prevent substantial overpayment or underpayment, the provisional or billing rates may be prospectively or retroactively revised by mutual agreement.
- f. Failure by the parties to agree on final rates is a 22 CFR 226.90 dispute.

(END OF PROVISION)**3. NEGOTIATED INDIRECT COST RATE - PROVISIONAL (Profit) (APRIL 1998)**

APPLICABILITY: This provision applies to for-profit organizations whose indirect cost rates under this award are on a provisional basis.

NEGOTIATED INDIRECT COST RATE - PROVISIONAL (Profit) (APRIL 1998)

- a. Provisional indirect cost rates shall be established for the recipient's accounting periods during the term of this award. Pending establishment of revised provisional or final rates, allowable indirect costs shall be reimbursed at the rates, on the bases, and for the periods shown in the schedule of this award. Indirect cost rates and the appropriate bases shall be established in accordance with FAR Subpart 42.7.

- b. Within six months after the close of the recipient's fiscal year, the recipient shall submit to the cognizant agency for audit the proposed final indirect cost rates and supporting cost data. If USAID is the cognizant agency or no cognizant agency has been designated, the recipient shall submit three copies of the proposed final indirect cost rates and supporting cost data, to the Overhead, Special Costs, and Closeout Branch, Office of Procurement, USAID, Washington, DC 20523-7802. The proposed rates shall be based on the recipient's actual cost experience during that fiscal year. Negotiations of final indirect cost rates shall begin soon after receipt of the recipient's proposal.
- c. Allowability of costs and acceptability of cost allocation methods shall be determined in accordance with the applicable cost principles.
- d. The results of each negotiation shall be set forth in an indirect cost rate agreement signed by both parties. Such agreement is automatically incorporated into this award and shall specify (1) the agreed upon final rates, (2) the bases to which the rates apply, (3) the fiscal year for which the rates apply, and (4) the items treated as direct costs. The agreement shall not change any monetary ceiling, award obligation, or specific cost allowance or disallowance provided for in this award.
- e. Pending establishment of final indirect cost rates for any fiscal year, the recipient shall be reimbursed either at negotiated provisional rates or at billing rates acceptable to the Agreement Officer, subject to appropriate adjustment when the final rates for the fiscal year are established. To prevent substantial overpayment or underpayment, the provisional or billing rates may be prospectively or retroactively revised by mutual agreement.
- f. Failure by the parties to agree on final rates is a 22 CFR 226.90 dispute.

(END OF PROVISION)

4. PUBLICATIONS AND MEDIA RELEASES (MARCH 2006)

APPLICABILITY: This provision is applicable when publications are financed under the award.

PUBLICATIONS AND MEDIA RELEASES (MARCH 2006)

- a. The recipient shall provide the USAID Cognizant Technical Officer one copy of all published works developed under the award with lists of other written work produced under the award. In addition, the recipient shall submit final documents in electronic format unless no electronic version exists at the following address: Online (preferred)
<http://www.dec.org/submit.cfm>.

Mailing address:

Document Acquisitions

USAID Development Experience Clearinghouse (DEC)

8403 Colesville Road Suite 210

Silver Spring, MD 20910-6368

Contract Information

Telephone (301) 562-0641

Fax (301) 588-7787

E-mail: docsuubmit@dec.cdle.org

Electronic documents must consist of only one electronic file that comprises the complete and final equivalent of a hard copy. They may be submitted online (preferred); on 3.5" diskettes, a Zip disk, CD-R, or by e-mail. Electronic documents should be in PDF (Portable Document Format). Submission in other formats is acceptable but discouraged.

Each document submitted should contain essential bibliographic elements, such as 1) descriptive title; 2) author(s) name; 3) award number; 4) sponsoring USAID office; 5) strategic objective; and 6) date of publication;:

- b. In the event award funds are used to underwrite the cost of publishing, in lieu of the publisher assuming this cost as is the normal practice, any profits or royalties up to the amount of such cost shall be credited to the award unless the schedule of the award has identified the profits or royalties as program income.
- c. Except as otherwise provided in the terms and conditions of the award, the author or the recipient is free to copyright any books, publications, or other copyrightable materials developed in the course of or under this award, but USAID reserves a royalty-free nonexclusive and irrevocable right to reproduce, publish, or otherwise use, and to authorize others to use the work for Government purposes.

(END OF PROVISION)

5. PARTICIPANT TRAINING (APRIL 1998)

APPLICABILITY: This provision is applicable when any participant training is financed under the award.

PARTICIPANT TRAINING (APRIL 1998)

- a. Definition: A participant is any non-U.S. individual being trained under this award outside of that individual's home country.
- b. Application of ADS Chapter 253: Participant training under this award shall comply with the policies established in ADS Chapter 253, Participant Training, except to the extent that specific exceptions to ADS 253 have been provided in this award with the concurrence of the Office of International Training.
- c. Orientation: In addition to the mandatory requirements in ADS 253, recipients are strongly encouraged to provide, in collaboration with the Mission training officer, predeparture orientation and orientation in Washington at the Washington International Center. The latter orientation program also provides the opportunity to arrange for home hospitality in Washington and elsewhere in the United States through liaison with the National Council for International Visitors (NCIV). If the Washington orientation is determined not to be feasible, home hospitality can be arranged in most U.S. cities if a request for such is directed to the Agreement Officer, who will transmit the request to NCIV through EGAT/ED/PT.

(END OF PROVISION)

**6. VOLUNTARY POPULATION PLANNING ACTIVITIES –
SUPPLEMENTAL REQUIREMENTS (MAY 2006)**

APPLICABILITY: This provision is applicable to all awards involving any aspect of voluntary population planning activities.

VOLUNTARY POPULATION PLANNING ACTIVITIES – SUPPLEMENTAL REQUIREMENTS (MAY 2006)**a. Voluntary Participation and Family Planning Methods:**

- (1) The recipient agrees to take any steps necessary to ensure that funds made available under this award will not be used to coerce any individual to practice methods of family planning inconsistent with such individual's moral, philosophical, or religious beliefs. Further, the recipient agrees to conduct its activities in a manner which safeguards the rights, health and welfare of all individuals who take part in the program.
- (2) Activities which provide family planning services or information to individuals, financed in whole or in part under this agreement, shall provide a broad range of family planning methods and services available in the country in which the activity is conducted or shall provide information to such individuals regarding where such methods and services may be obtained.

b. Requirements for Voluntary Family Planning Projects

- (1) A Family planning project must comply with the requirements of this paragraph.
- (2) A project is a discrete activity through which a governmental or nongovernmental organization or public international organization provides family planning services to people and for which funds obligated under this award, or goods or services financed with such funds, are provided under this award, except funds solely for the participation of personnel in short-term, widely attended training conferences or programs.
- (3) Service providers and referral agents in the project shall not implement or be subject to quotas or other numerical targets of total number of births, number of family planning acceptors, or acceptors of a particular method of family planning. Quantitative estimates or indicators of the number of births, acceptors, and acceptors of a particular method that are used for the purpose of budgeting, planning, or reporting with respect to the project are not quotas or targets under this paragraph, unless service providers or referral agents in the project are required to achieve the estimates or indicators.
- (4) The project shall not include the payment of incentives, bribes, gratuities or financial rewards to (i) any individual in exchange for becoming a family planning acceptor or (ii) any personnel performing functions under the project for achieving a numerical quota or target of total number of births, number of family planning acceptors, or acceptors of a particular method of contraception. This restriction applies to salaries or payments paid or made to personnel performing functions under the project if the amount of the salary or payment increases or decreases based on a predetermined number of births, number of family planning acceptors, or number of acceptors of a particular method of contraception that the personnel affect or achieve.
- (5) No person shall be denied any right or benefit, including the right of access to participate in any program of general welfare or health care, based on the person's decision not to accept family planning services offered by the project.

- (6) The project shall provide family planning acceptors comprehensible information about the health benefits and risks of the method chosen, including those conditions that might render the use of the method inadvisable and those adverse side effects known to be consequent to the use of the method. This requirement may be satisfied by providing information in accordance with the medical practices and standards and health conditions in the country where the project is conducted through counseling, brochures, posters, or package inserts.
 - (7) The project shall ensure that experimental contraceptive drugs and devices and medical procedures are provided only in the context of a scientific study in which participants are advised of potential risks and benefits.
 - (8) With respect to projects for which USAID provides, or finances the contribution of, contraceptive commodities or technical services and for which there is no subaward or contract under this award, the organization implementing a project for which such assistance is provided shall agree that the project will comply with the requirements of this paragraph while using such commodities or receiving such services.
 - (9)
 - i) The recipient shall notify USAID when it learns about an alleged violation in a project of the requirements of subparagraphs (3), (4), (5) or (7) of this paragraph;
 - ii) The recipient shall investigate and take appropriate corrective action, if necessary, when it learns about an alleged violation in a project of subparagraph (6) of this paragraph and shall notify USAID about violations in a project affecting a number of people over a period of time that indicate there is a systemic problem in the project.
 - iii) The recipient shall provide USAID such additional information about violations as USAID may request.
- c. Additional Requirements for Voluntary Sterilization Programs
- (1) None of the funds made available under this award shall be used to pay for the performance of involuntary sterilization as a method of family planning or to coerce or provide any financial incentive to any individual to practice sterilization.
 - (2) The recipient shall ensure that any surgical sterilization procedures supported in whole or in part by funds from this award are performed only after the individual has voluntarily appeared at the treatment facility and has given informed consent to the sterilization procedure. Informed consent means the voluntary, knowing assent from the individual after being advised of the surgical procedures to be followed, the attendant discomforts and risks, the benefits to be expected, the availability of alternative methods of family planning, the purpose of the operation and its irreversibility, and the option to withdraw consent anytime prior to the operation. An individual's consent is considered voluntary if it is based upon the exercise of free choice and is not obtained by any special inducement or any element of force, fraud, deceit, duress, or other forms of coercion or misrepresentation.
 - (3) Further, the recipient shall document the patient's informed consent by (i) a written consent document in a language the patient understands and speaks, which explains the basic elements of informed consent, as set out above, and which is signed by the individual and by the attending physician or by the authorized assistant of the attending physician; or (ii) when a patient is unable to read adequately a written certification by the

attending physician or by the authorized assistant of the attending physician that the basic elements of informed consent above were orally presented to the patient, and that the patient thereafter consented to the performance of the operation. The receipt of this oral explanation shall be acknowledged by the patient's mark on the certification and by the signature or mark of a witness who shall speak the same language as the patient.

- (4) The recipient must retain copies of informed consent forms and certification documents for each voluntary sterilization procedure for a period of three years after performance of the sterilization procedure.

d. Prohibition on Abortion-Related Activities:

- (1) No funds made available under this award will be used to finance, support, or be attributed to the following activities: (i) procurement or distribution of equipment intended to be used for the purpose of inducing abortions as a method of family planning; (ii) special fees or incentives to any person to coerce or motivate them to have abortions; (iii) payments to persons to perform abortions or to solicit persons to undergo abortions; (iv) information, education, training, or communication programs that seek to promote abortion as a method of family planning; and (v) lobbying for or against abortion. The term “motivate”, as it relates to family planning assistance, shall not be construed to prohibit the provision, consistent with local law, of information or counseling about all pregnancy options.
- (2) No funds made available under this award will be used to pay for any biomedical research which relates, in whole or in part, to methods of, or the performance of, abortions or involuntary sterilizations as a means of family planning. Epidemiologic or descriptive research to assess the incidence, extent or consequences of abortions is not precluded.

*e. Ineligibility of Foreign Nongovernmental Organizations that Perform or Actively Promote Abortion as a Method of Family Planning.

I. Grants and Cooperative Agreements with U.S. Nongovernmental Organizations

- (1) The recipient agrees that it will not furnish assistance for family planning under this award to any foreign nongovernmental organization that performs or actively promotes abortion as a method of family planning in USAID-recipient countries or that provides financial support to any other foreign nongovernmental organization that conducts such activities. For purposes of this paragraph (e), a foreign nongovernmental organization is a nongovernmental organization that is not organized under the laws of any State of the United States, the District of Columbia or the Commonwealth of Puerto Rico.
- (2) Prior to furnishing funds provided under this award to another nongovernmental organization organized under the laws of any State of the United States, the District of Columbia, or the Commonwealth of Puerto Rico, the recipient shall obtain the written agreement of such organization that the organization shall not furnish assistance for family planning under this award to any foreign nongovernmental organization except under the conditions and requirements that are applicable to the recipient as set forth in this paragraph (e).
- (3) The recipient may not furnish assistance for family planning under this award to a foreign nongovernmental organization (the subrecipient) unless:

- (i) The subrecipient certifies in writing that it does not perform or actively promote abortion as a method of family planning in USAID recipient countries and does not provide financial support to any other foreign nongovernmental organization that conducts such activities; and
 - (ii) The recipient obtains the written agreement of the subrecipient containing the undertakings described in subparagraph (4) below.
- (4) Prior to furnishing assistance for family planning under this award to a subrecipient, the subrecipient must agree in writing that:
 - (i) The subrecipient will not, while receiving assistance under this award, perform or actively promote abortion as a method of family planning in USAID-recipient countries or provide financial support to other foreign nongovernmental organizations that conduct such activities;
 - (ii) The recipient and authorized representatives of USAID may, at any reasonable time: (A) inspect the documents and materials maintained or prepared by the subrecipient in the usual course of its operations that describe the family planning activities of the subrecipient, including reports, brochures and service statistics; (B) observe the family planning activity conducted by the subrecipient; (C) consult with family planning personnel of the subrecipient; and (D) obtain a copy of the audited financial statement or report of the subrecipient, if there is one;
 - (iii) In the event that the recipient or USAID has reasonable cause to believe that a subrecipient may have violated its undertaking not to perform or actively promote abortion as a method of family planning, the recipient shall review the family planning program of the subrecipient to determine whether a violation of the undertaking has occurred. The subrecipient shall make available to the recipient such books and records and other information as may be reasonably requested in order to conduct the review. USAID may also review the family planning program of the subrecipient under these circumstances, and USAID shall have access to such books and records and information for inspection upon request;
 - (iv) The subrecipient shall refund to the recipient the entire amount of assistance for family planning furnished to the subrecipient under this award in the event it is determined that the certification provided by the subrecipient under subparagraph (3), above, is false;
 - (v) Assistance for family planning provided to the subrecipient under this award shall be terminated if the subrecipient violates any undertaking in the agreement required by subparagraphs (3) and (4), and the subrecipient shall refund to the recipient the value of any assistance furnished under this award that is used to perform or actively promote abortion as a method of family planning; and
 - (vi) The subrecipient may furnish assistance for family planning under this award to another foreign nongovernmental organization (the subsubrecipient) only if: (A) the subsubrecipient certifies in writing that it does not perform or actively promote abortion as a method of family planning in USAID-recipient countries and does not provide financial support to any other foreign nongovernmental organization that conducts such activities; and (B) the subrecipient obtains the written agreement of the sub-subrecipient that contains the

same undertakings and obligations to the subrecipient as those provided by the subrecipient to the recipient as described in subparagraphs (4)(i)-(v) above.

(5) Agreements with subrecipients and sub-subrecipients required under subparagraphs (3) and (4) shall contain the definitions set forth in subparagraph (10) of this paragraph (e).

(6) The recipient shall be liable to USAID for a refund for a violation of any requirement of this paragraph (e) only if: (i) the recipient knowingly furnishes assistance for family planning to a subrecipient who performs or actively promotes abortion as a method of family planning; or (ii) the certification provided by a subrecipient is false and the recipient failed to make reasonable efforts to verify the validity of the certification prior to furnishing assistance to the subrecipient; or (iii) the recipient knows or has reason to know, by virtue of the monitoring which the recipient is required to perform under the terms of this award, that a subrecipient has violated any of the undertakings required under subparagraph (4) and the recipient fails to terminate assistance for family planning to the subrecipient, or fails to require the subrecipient to terminate assistance to a sub-subrecipient that violates any undertaking of the agreement required under subparagraph 4(vi), above. If the recipient finds, in exercising its monitoring responsibility under this award, that a subrecipient or subsubrecipient receives frequent requests for the information described in subparagraph (10)(iii)(A)(II), below, the recipient shall verify that this information is being provided properly in accordance with subparagraph (10)(iii)(A)(II) and shall describe to USAID the reasons for reaching its conclusion.

(7) In submitting a request to USAID for approval of a recipient's decision to furnish assistance for family planning to a subrecipient, the recipient shall include a description of the efforts made by the recipient to verify the validity of the certification provided by the subrecipient. USAID may request the recipient to make additional efforts to verify the validity of the certification. USAID will inform the recipient in writing when USAID is satisfied that reasonable efforts have been made. If USAID concludes that these efforts are reasonable within the meaning of subparagraph (6) above, the recipient shall not be liable to USAID for a refund in the event the subrecipient's certification is false unless the recipient knew the certification to be false or misrepresented to USAID the efforts made by the recipient to verify the validity of the certification.

(8) It is understood that USAID may make independent inquiries, in the community served by a subrecipient or sub-subrecipient, regarding whether it performs or actively promotes abortion as a method of family planning.

(9) A subrecipient must provide the certification required under subparagraph (3) and a sub-subrecipient must provide the certification required under subparagraph (4)(vi) each time a new agreement is executed with the subrecipient or sub-subrecipient in furnishing assistance for family planning under the award.

(10) The following definitions apply for purposes of this paragraph (e):

(i) Abortion is a method of family planning when it is for the purpose of spacing births. This includes, but is not limited to, abortions performed for the physical or mental health of the mother, but does not include abortions performed if the life of the mother would be endangered if the fetus were carried to term or abortions performed following rape or incest (since abortion under these circumstances is not a family planning act).

(ii) To perform abortions means to operate a facility where abortions are performed as a method of family planning. Excluded from this definition are clinics or hospitals that do not

include abortion in their family planning programs. Also excluded from this definition is the treatment of injuries or illnesses caused by legal or illegal abortions, for example, postabortion care.

(iii) To actively promote abortion means for an organization to commit resources, financial or other, in a substantial or continuing effort to increase the availability or use of abortion as a method of family planning.

(A) This includes, but is not limited to, the following:

- (I) Operating a family planning counseling service that includes, as part of the regular program, providing advice and information regarding the benefits and availability of abortion as a method of family planning;
- (II) Providing advice that abortion is an available option in the event other methods of family planning are not used or are not successful or encouraging women to consider abortion (passively responding to a question regarding where a safe, legal abortion may be obtained is not considered active promotion if the question is specifically asked by a woman who is already pregnant, the woman clearly states that she has already decided to have a legal abortion, and the family planning counselor reasonably believes that the ethics of the medical profession in the country requires a response regarding where it may be obtained safely);
- (III) Lobbying a foreign government to legalize or make available abortion as a method of family planning or lobbying such a government to continue the legality of abortion as a method of family planning; and
- (IV) Conducting a public information campaign in USAID recipient countries regarding the benefits and/or availability of abortion as a method of family planning.

(B) Excluded from the definition of active promotion of abortion as a method of family planning are referrals for abortion as a result of rape or incest, or if the life of the mother would be endangered if the fetus were carried to term. Also excluded from this definition is the treatment of injuries or illnesses caused by legal or illegal abortions, for example, post-abortion care.

(C) Action by an individual acting in the individual's capacity shall not be attributed to an organization with which the individual is associated, provided that the organization neither endorses nor provides financial support for the action and takes reasonable steps to ensure that the individual does not improperly represent that the individual is acting on behalf of the organization.

(iv) To furnish assistance for family planning to a foreign nongovernmental organization means to provide financial support under this award to the family planning program of the organization, and includes the transfer of funds made available under this award or goods or services financed with such funds, but does not include the purchase of goods or services from an organization or the participation of an individual in the general training programs of the recipient, subrecipient or subsubrecipient.

(v) To control an organization means the possession of the power to direct or cause the direction of the management and policies of an organization.

- (11) In determining whether a foreign nongovernmental organization is eligible to be a subrecipient or sub-subrecipient of assistance for family planning under this award, the action of separate nongovernmental organizations shall not be imputed to the subrecipient or sub-subrecipient, unless, in the judgment of USAID, a separate nongovernmental organization is being used as a sham to avoid the restrictions of this paragraph (e). Separate nongovernmental organizations are those that have distinct legal existence in accordance with the laws of the countries in which they are organized. Foreign organizations that are separately organized shall not be considered separate, however, if one is controlled by the other. The recipient may request USAID's approval to treat as separate the family planning activities of two or more organizations, that would not be considered separate under the preceding sentence, if the recipient believes, and provides a written justification to USAID therefore, that the family planning activities of the organizations are sufficiently distinct so as to warrant not imputing the activity of one to the other.
- (12) Assistance for family planning may be furnished under this award by a recipient or sub-subrecipient to a foreign government event though the government includes abortion in its family planning program, provided that no assistance may be furnished in support of the abortion activity of the government and any funds transferred to the government shall be placed in a segregated account to ensure that such funds may not be used to support the abortion activity of the government.
- (13) The requirements of this paragraph are not applicable to child spacing assistance furnished to a foreign nongovernmental organization that is engaged primarily in providing health services if the objective of the assistance is to finance integrated health care services to mothers and children and child spacing is one of several health care services being provided by the organization as part of a larger child survival effort with the objective of reducing infant and child mortality.

II. Grants and Cooperative Agreements with Non-U.S., Nongovernmental Organizations

- (1) The recipient certifies that it does not now and will not during the term of this award perform or actively promote abortion as a method of family planning in USAID-recipient countries or provide financial support to any other foreign nongovernmental organization that conducts such activities. For purposes of this paragraph (e), a foreign nongovernmental organization is a nongovernmental organization that is not organized under the laws of any State of the United States, the District of Columbia or the Commonwealth of Puerto Rico.
- (2) The recipient agrees that the authorized representative of USAID may, at any reasonable time: (i) inspect the documents and materials maintained or prepared by the recipient in the usual course of its operations that describe the family planning activities of the recipient, including reports, brochures and service statistics; (ii) observe the family planning activity conducted by the recipient, (iii) consult with the family planning personnel of the recipient; and (iv) obtain a copy of the audited financial statement or report of the recipient, if there is one.
- (3) In the event USAID has reasonable cause to believe that the recipient may have violated its undertaking not to perform or actively promote abortion as a method of family planning, the recipient shall make available to USAID such books and records and other information as USAID may reasonably request in order to determine whether a violation of the undertaking has occurred.

(4) The recipient shall refund to USAID the entire amount of assistance for family planning furnished under this award in the event it is determined that the certification provided by the recipient under subparagraph (1), above, is false.

(5) Assistance for family planning to the recipient under this award shall be terminated if the recipient violates any undertaking required by this paragraph (e), and the recipient shall refund to USAID the value of any assistance furnished under this award that is used to perform or actively promote abortion as a method of family planning.

(6) The recipient may not furnish assistance for family planning under this award to a foreign nongovernmental organization (the subrecipient) unless: (i) the subrecipient certifies in writing that it does not perform or actively promote abortion as a method of family planning in USAID-recipient countries and does not provide financial support to any other foreign nongovernmental organization that conducts such activities; and (ii) the recipient obtains the written agreement of the subrecipient containing the undertakings described in subparagraph (7), below.

(7) Prior to furnishing assistance for family planning under this award to a subrecipient, the subrecipient must agree in writing that:

(i) The subrecipient will not, while receiving assistance under this award, perform or actively promote abortion as a method of family planning in USAID-recipient countries or provide financial support to other nongovernmental organizations that conduct such activities.

(ii) The recipient and authorized representatives of USAID may, at any reasonable time: (A) inspect the documents and materials maintained or prepared by the subrecipient in the usual course of its operations that describe the family planning activities of the subrecipient, including reports, brochures and service statistics; (B) observe the family planning activity conducted by the subrecipient; (C) consult with family planning personnel of the subrecipient; and (D) obtain a copy of the audited financial statement or report of the subrecipient, if there is one.

(iii) In the event the recipient or USAID has reasonable cause to believe that a subrecipient may have violated its undertaking not to perform or actively promote abortion as a method of family planning, the recipient shall review the family planning program of the subrecipient to determine whether a violation of the undertaking has occurred. The subrecipient shall make available to the recipient such books and records and other information as may be reasonably requested in order to conduct the review. USAID may also review the family planning program of the subrecipient under these circumstances, and USAID shall have access to such books and records and information for inspection upon request.

(iv) The subrecipient shall refund to the recipient the entire amount of assistance for family planning furnished to the subrecipient under this award in the event it is determined that the certification provided by the subrecipient under subparagraph (6), above, is false.

(v) Assistance for family planning to the subrecipient under this award shall be terminated if the subrecipient violates any undertaking required by this paragraph (e), and the subrecipient shall refund to the recipient the value of any assistance furnished under this award that is used to perform or actively promote abortion as a method of family planning.

- (vi) The subrecipient may furnish assistance for family planning under this award to another foreign nongovernmental organization (the subsubrecipient) only if: (A) the subsubrecipient certifies in writing that it does not perform or actively promote abortion as a method of family planning in USAID-recipient countries and does not provide financial support to any other foreign nongovernmental organization that conducts such activities; and (B) the subrecipient obtains the written agreement of the sub-subrecipient that contains the same undertakings and obligations to the subrecipient as those provided by the subrecipient to the recipient as described in subparagraphs (7)(i)-(v), above.
- (8) Agreements with subrecipients and sub-subrecipients required under subparagraphs (6) and (7) shall contain the definitions set forth in subparagraph (13) of this paragraph (e).
- (9) The recipient shall be liable to USAID for a refund for a violation by a subrecipient relating to its certification required under subparagraph (6) or by a subrecipient or a sub-subrecipient relating to its undertakings in the agreement required under subparagraphs (6) and (7) only if: (i) the recipient knowingly furnishes assistance for family planning to a subrecipient that performs or actively promotes abortion as a method of family planning; or (ii) the certification provided by a subrecipient is false and the recipient failed to make reasonable efforts to verify the validity of the certification prior to furnishing assistance to the subrecipient; or (iii) the recipient knows or has reason to know, by virtue of the monitoring that the recipient is required to perform under the terms of this award, that a subrecipient has violated any of the undertakings required under subparagraph (7) and the recipient fails to terminate assistance for family planning to the subrecipient, or fails to require the subrecipient to terminate assistance to a sub-subrecipient that violates any undertaking of the agreement required under subparagraph 7(vi), above. If the recipient finds, in exercising its monitoring responsibility under this award, that a subrecipient or sub-subrecipient receives frequent requests for the information described in subparagraph (13)(iii)(A)(II), below, the recipient shall verify that this information is being provided properly in accordance with subparagraph 13(iii)(A)(II) and shall describe to USAID the reasons for reaching its conclusion.
- (10) In submitting a request to USAID for approval of a recipient's decision to furnish assistance for family planning to a subrecipient, the recipient shall include a description of the efforts made by the recipient to verify the validity of the certification provided by the subrecipient. USAID may request the recipient to make additional efforts to verify the validity of the certification. USAID will inform the recipient in writing when USAID is satisfied that reasonable efforts have been made. If USAID concludes that these efforts are reasonable within the meaning of subparagraph (9) above, the recipient shall not be liable to USAID for a refund in the event the subrecipient's certification is false unless the recipient knew the certification to be false or misrepresented to USAID the efforts made by the recipient to verify the validity of the certification.
- (11) It is understood that USAID may make independent inquiries, in the community served by a subrecipient or sub-subrecipient, regarding whether it performs or actively promotes abortion as a method of family planning.
- (12) A subrecipient must provide the certification required under subparagraph (6) and a subsubrecipient must provide the certification required under subparagraph (7)(vi) each time a new agreement is executed with the subrecipient or sub-subrecipient in furnishing assistance for family planning under this award.
- (13) The following definitions apply for purposes of paragraph (e):

(i) Abortion is a method of family planning when it is for the purpose of spacing births. This includes, but is not limited to, abortions performed for the physical or mental health of the mother but does not include abortions performed if the life of the mother would be endangered if the fetus were carried to term or abortions performed following rape or incest (since abortion under these circumstances is not a family planning act).

(ii) To perform abortions means to operate a facility where abortions are performed as a method of family planning. Excluded from this definition are clinics or hospitals that do not include abortion in their family planning programs. Also excluded from this definition is the treatment of injuries or illnesses caused by legal or illegal abortions, for example, postabortion care.

(iii) To actively promote abortion means for an organization to commit resources, financial or other, in a substantial or continuing effort to increase the availability or use of abortion as a method of family planning.

(A) This includes, but is not limited to, the following:

(I) Operating a family planning counseling service that includes, as part of the regular program, providing advice and information regarding the benefits and availability of abortion as a method of family planning;

(II) Providing advice that abortion is an available option in the event other methods of family planning are not used or are not successful or encouraging women to consider abortion (passively responding to a question regarding where a safe, legal abortion may be obtained is not considered active promotion if the question is specifically asked by a woman who is already pregnant, the woman clearly states that she has already decided to have a legal abortion, and the family planning counselor reasonably believes that the ethics of the medical profession in the country requires a response regarding where it may be obtained safely);

(III) Lobbying a foreign government to legalize or make available abortion as a method of family planning or lobbying such a government to continue the legality of abortion as a method of family planning; and

(IV) Conducting a public information campaign in USAID recipient countries regarding the benefits and/or availability of abortion as a method of family planning.

(B) Excluded from the definition of active promotion of abortion as a method of family planning are referrals for abortion as a result of rape or incest or if the life of the mother would be endangered if the fetus were carried to term. Also excluded from this definition is the treatment of injuries or illnesses caused by legal or illegal abortions, for example, post-abortion care.

(C) Action by an individual acting in the individual's own capacity shall not be attributed to an organization with which the individual is associated, provided that the organization neither endorses nor provides financial support for the action and takes reasonable steps to ensure that the individual does not improperly represent the individual is acting on behalf of the organization.

(iv) To furnish assistance for family planning to a foreign nongovernmental organization means to provide financial support under this award to the family planning program of the organization, and includes the transfer of funds made available under this award or goods or services financed with such funds, but does not include the purchase of goods or services from an organization or the participation of an individual in the general training programs of the recipient, subrecipient or subsubrecipient.

(v) To control an organization means the possession of the power to direct or cause the direction of the management and policies of an organization.

(14) In determining whether a foreign nongovernmental organization is eligible to be a recipient, subrecipient or sub-subrecipient of assistance for family planning under this award, the action of separate nongovernmental organizations shall not be imputed to the recipient, subrecipient or subsubrecipient, unless, in the judgment of USAID, a separate nongovernmental organization is being used as a sham to avoid the restrictions of this paragraph (e). Separate nongovernmental organizations are those that have distinct legal existence in accordance with the laws of the countries in which they are organized. Foreign organizations that are separately organized shall not be considered separate, however, if one is controlled by the other. The recipient may request USAID's approval to treat as separate the family planning activities of two or more organizations, which would not be considered separate under the preceding sentence, if the recipient believes, and provides a written justification to USAID therefore, that the family planning activities of the organizations are sufficiently distinct so as to warrant not imputing the activity of one of the other.

(15) Assistance for family planning may be furnished under this award by a recipient, subrecipient or sub-subrecipient to a foreign government even though the government includes abortion in its family planning program, provided that no assistance may be furnished in support of the abortion activity of the government and any funds transferred to the government shall be placed in a segregated account to ensure that such funds may not be used to support the abortion activity of the government.

(16) The requirements of this paragraph are not applicable to child spacing assistance furnished to a foreign nongovernmental organization that is engaged primarily in providing health services if the objective of the assistance is to finance integrated health care services to mothers and children and child spacing is one of several health care services being provided by the organization as part of a larger child survival effort with the objective of reducing infant and child mortality.

III. Exceptions

The paragraphs set forth in sections (I) and (II) above are not applicable in the situations described below:

(1) While the paragraphs are to be used in grants and cooperative agreements (and assistance subagreements) that provide financing for family planning activity or activities, if family planning is a component of an activity involving assistance or other purposes, such as food and nutrition, health for education, paragraph (e), "Ineligibility of Foreign Nongovernmental Organizations that Perform or Actively Promote Abortion as a Method of Family Planning," applies only to the family planning component.

(2) When health or child survival funds are used to provide assistance for child spacing as well as health purposes, these paragraphs are applicable to such assistance unless: (a) the foreign nongovernmental organization is one that primarily provides health services; (b) the objective of the assistance is to finance integrated health care services to mothers and children; and (c) child spacing

is one of several health care services being provided as part of a larger child survival effort with the objective of reducing infant and child mortality. These paragraphs need not be included in the assistance agreement if it indicates that assistance for child spacing will be provided only in this way. USAID support under these circumstances is considered a contribution to a health service delivery program and not to a family planning program. In such a case, these paragraphs need not be included in an assistance agreement.

(3) These paragraphs need not be included in assistance agreements with United States nongovernmental organizations for family planning purposes if implementation of the activity does not involve assistance to foreign nongovernmental organizations.

*f. The recipient shall insert paragraphs (a), (b), (c), (d), and (f) of this provision in all subsequent subagreements and contracts involving family planning or population activities that will be supported in whole or in part from funds under this award. Paragraph (e) shall be inserted in subagreements and sub-subagreements in accordance with the terms of paragraph (e). The term subagreement means subgrants and subcooperative agreements.

(END OF PROVISION)

7. PROTECTION OF THE INDIVIDUAL AS A RESEARCH SUBJECT (APRIL 1998)

APPLICABILITY: This provision is applicable when human subjects are involved in research financed by the award.

PROTECTION OF THE INDIVIDUAL AS A RESEARCH SUBJECT (APRIL 1998)

- a. Safeguarding the rights and welfare of human subjects involved in research supported by USAID is the responsibility of the organization to which support is awarded. USAID has adopted the Common Federal Policy for the Protection of Human Subjects, Part 225 of Title 22 of the Code of Federal Regulations (the "Policy"). Additional interpretation, procedures, and implementation guidance of the Policy are found in USAID General Notice entitled "Procedures for the Protection of Human Subjects in Research Supported by USAID," issued April 19, 1995, as from time to time amended. USAID's Cognizant Human Subjects Officer (CHSO) in USAID/W has oversight, guidance, and interpretation responsibility for the Policy.
- b. Recipient organizations must comply with USAID policy when humans are the subject of research, as defined in 22 CFR 225.102(d), funded by the grant and recipients must provide "assurance", as required by 22 CFR 225.103, that they follow and abide by the procedures in the Policy. See also Section 5 of the April 19, 1995, USAID General Notice which sets forth activities to which the Policy is applicable. The existence of a bona fide, applicable assurance approved by the Department of Health and Human Services (HHS) such as the "multiple project assurance" (MPA) will satisfy this requirement. Alternatively, organizations can provide an acceptable written assurance to USAID as described in 22 CFR 225.103. Such assurances must be determined by the CHSO to be acceptable prior to any applicable research being initiated or conducted under the award. In some limited instances outside the U.S., alternative systems for the protection of human subjects may be used provided they are deemed "at least equivalent" to those outlined in Part 225 (See 22 CFR 225.101[h]). Criteria and procedures for making this determination are described in the General Notice cited in the preceding paragraph.

- c. Since the welfare of the research subject is a matter of concern to USAID as well as to the organization, USAID staff consultants and advisory groups may independently review and inspect research and research processes and procedures involving human subjects, and based on such findings, the CHSO may prohibit research which presents unacceptable hazards or otherwise fails to comply with USAID procedures. Informed consent documents must include the stipulation that the subject's records may be subject to such review.

(END OF PROVISION)

8. CARE OF LABORATORY ANIMALS (MARCH 2004)

APPLICABILITY: This provision is applicable when laboratory animals are involved in research performed in the U.S. and financed by the award.

CARE OF LABORATORY ANIMALS (MARCH 2004)

- a. Before undertaking performance of any grant involving the use of laboratory animals, the recipient shall register with the Secretary of Agriculture of the United States in accordance with Section 6, Public Law 89-544, Laboratory Animal Welfare Act, August 24, 1966, as amended by Public Law 91-579, Animal Welfare Act of 1970, December 24, 1970. The recipient shall furnish evidence of such registration to the Agreement Officer.
- b. The recipient shall acquire animals used in research under this award only from dealers licensed by the Secretary of Agriculture, or from exempted sources in accordance with the Public Laws enumerated in (a) above.
- c. In the care of any live animals used or intended for use in the performance of this grant, the recipient shall adhere to the principles enunciated in the Guide for Care and Use of Laboratory Animals prepared by the Institute of Laboratory Animals Resources, National Academy of Sciences - National Research Council, and in the United States Department of Agriculture's (USDA) regulations and standards issued under the Public Laws enumerated in a. above. In case of conflict between standards, the higher standard shall be used. The recipient's reports on portions of the award in which animals were used shall contain a certificate stating that the animals were cared for in accordance with the principles enunciated in the Guide for Care and Use of Laboratory Animals prepared by the Institute of Laboratory Animal Resources, NAS-NRC, and/or in the regulations and standards as promulgated by the Agricultural Research Service, USDA, pursuant to the Laboratory Animal Welfare Act of 24 August 1966, as amended (P.L. 89-544 and P.L. 91-579). NOTE: The recipient may request registration of the recipient's facility and a current listing of licensed dealers from the Regional Office of the Animal and Plant Health Inspection Service (APHIS), USDA, for the region in which the recipient's research facility is located. The location of the appropriate APHIS Regional Office as well as information concerning this program may be obtained by contacting the Senior Staff Office, Animal Care Staff, USDA/APHIS, 4700 River Road Unit 84, Riverdale, MD 20737-1234 and at <http://www.aphis.usda.gov/ac/>.

(END OF PROVISION)

**9. TITLE TO AND CARE OF PROPERTY (COOPERATING COUNTRY TITLE)
(NOVEMBER 1985)**

APPLICABILITY: This provision is applicable to property titled in the name of the cooperating country or such public or private agency as the cooperating country government may designate.

**TITLE TO AND CARE OF PROPERTY (COOPERATING COUNTRY TITLE)
(NOVEMBER 1985)**

- a. Except as modified by the schedule of this grant, title to all equipment, materials and supplies, the cost of which is reimbursable to the recipient by USAID or by the cooperating country, shall at all times be in the name of the cooperating country or such public or private agency as the cooperating country may designate, unless title to specified types or classes of equipment is reserved to USAID under provisions set forth in the schedule of this award. All such property shall be under the custody and control of recipient until the owner of title directs otherwise or completion of work under this award or its termination, at which time custody and control shall be turned over to the owner of title or disposed of in accordance with its instructions. All performance guarantees and warranties obtained from suppliers shall be taken in the name of the title owner.
- b. The recipient shall maintain and administer in accordance with sound business practice a program for the maintenance, repair, protection, and preservation of Government property so as to assure its full availability and usefulness for the performance of this grant. The recipient shall take all reasonable steps to comply with all appropriate directions or instructions which the Agreement Officer may prescribe as reasonably necessary for the protection of the Government property.
- c. The recipient shall prepare and establish a program, to be approved by the appropriate USAID Mission, for the receipt, use, maintenance, protection, custody and care of equipment, materials and supplies for which it has custodial responsibility, including the establishment of reasonable controls to enforce such program. The recipient shall be guided by the following requirements:

(1) Property Control: The property control system shall include but not be limited to the following:

- (i) Identification of each item of cooperating country property acquired or furnished under the award by a serially controlled identification number and by description of item. Each item must be clearly marked "Property of (insert name of cooperating country)."
- (ii) The price of each item of property acquired or furnished under this award.
- (iii) The location of each item of property acquired or furnished under this award.
- (iv) A record of any usable components which are permanently removed from items of cooperating country property as a result of modification or otherwise.
- (v) A record of disposition of each item acquired or furnished under the award.
- (vi) Date of order and receipt of any item acquired or furnished under the award.
- (vii) The official property control records shall be kept in such condition that at any stage of completion of the work under this award, the status of property acquired or furnished under this award may be readily ascertained. A report of current status of all items of property acquired or furnished under the award shall be submitted yearly concurrently with the annual report.

- (2) Maintenance Program: The recipient's maintenance program shall be consistent with sound business practice, the terms of the award, and provide for:
- (i) disclosure of need for and the performance of preventive maintenance,
 - (ii) disclosure and reporting of need for capital type rehabilitation, and
 - (iii) recording of work accomplished under the program:
 - (A) Preventive maintenance - Preventive maintenance is maintenance generally performed on a regularly scheduled basis to prevent the occurrence of defects and to detect and correct minor defects before they result in serious consequences.
 - (B) Records of maintenance - The recipient's maintenance program shall provide for records sufficient to disclose the maintenance actions performed and deficiencies discovered as a result of inspections.
 - (C) A report of status of maintenance of cooperating country property shall be submitted annually concurrently with the annual report.
- d. Risk of Loss:
- (1) The recipient shall not be liable for any loss of or damage to the cooperating country property, or for expenses incidental to such loss or damage except that the recipient shall be responsible for any such loss or damage (including expenses incidental thereto):
 - (i) Which results from willful misconduct or lack of good faith on the part of any of the recipient's directors or officers, or on the part of any of its managers, superintendents, or other equivalent representatives, who have supervision or direction of all or substantially all of the recipient's business, or all or substantially all of the recipient's operation at any one plant, laboratory, or separate location in which this award is being performed;
 - (ii) Which results from a failure on the part of the recipient, due to the willful misconduct or lack of good faith on the part of any of its directors, officers, or other representatives mentioned in (i) above:
 - (A) to maintain and administer, in accordance with sound business practice, the program for maintenance, repair, protection, and preservation of cooperating country property as required by (i) above, or
 - (B) to take all reasonable steps to comply with any appropriate written directions of the Agreement Officer under (b) above;
 - (iii) For which the recipient is otherwise responsible under the express terms designated in the schedule of this award;
 - (iv) Which results from a risk expressly required to be insured under some other provision of this award, but only to the extent of the insurance so required to be procured and maintained, or to the extent of insurance actually procured and maintained, whichever is greater; or

- (v) Which results from a risk which is in fact covered by insurance or for which the grantee is otherwise reimbursed, but only to the extent of such insurance or reimbursement;
 - (vi) Provided, that, if more than one of the above exceptions shall be applicable in any case, the recipient's liability under any one exception shall not be limited by any other exception.
- (2) The recipient shall not be reimbursed for, and shall not include as an item of overhead, the cost of insurance, or any provision for a reserve, covering the risk of loss of or damage to the cooperating country property, except to the extent that USAID may have required the recipient to carry such insurance under any other provision of this award.
- (3) Upon the happening of loss or destruction of or damage to the cooperating country property, the recipient shall notify the Agreement Officer thereof, shall take all reasonable steps to protect the cooperating country property from further damage, separate the damaged and undamaged cooperating country property, put all the cooperating country property in the best possible order, and furnish to the Agreement Officer a statement of:
 - (i) The lost, destroyed, or damaged cooperating country property;
 - (ii) The time and origin of the loss, destruction, or damage;
 - (iii) All known interests in commingled property of which the cooperating country property is a part; and
 - (iv) The insurance, if any, covering any part of or interest in such commingled property.
- (4) The recipient shall make repairs and renovations of the damaged cooperating country property or take such other action as the Agreement Officer directs.
- (5) In the event the recipient is indemnified, reimbursed, or otherwise compensated for any loss or destruction of or damage to the cooperating country property, it shall use the proceeds to repair, renovate or replace the cooperating country property involved, or shall credit such proceeds against the cost of the work covered by the award, or shall otherwise reimburse USAID, as directed by the Agreement Officer. The recipient shall do nothing to prejudice USAID's right to recover against third parties for any such loss, destruction, or damage, and upon the request of the Agreement Officer, shall, at the Government's expense, furnish to USAID all reasonable assistance and cooperation (including assistance in the prosecution of suits and the execution of instruments or assignments in favor of the Government) in obtaining recovery.
- e. Access: USAID, and any persons designated by it, shall at all reasonable times have access to the premises wherein any cooperating country property is located, for the purpose of inspecting the cooperating country property
- f. Final Accounting and Disposition of Cooperating Country Property: Within 90 days after completion of this award, or at such other date as may be fixed by the Agreement Officer, the recipient shall submit to the Agreement Officer an inventory schedule covering all items of equipment, materials and

supplies under the recipient's custody, title to which is in the cooperating country or public or private agency designated by the cooperating country, which have not been consumed in the performance of this award. The recipient shall also indicate what disposition has been made of such property.

- g. Communications: All communications issued pursuant to this provision shall be in writing.

(END OF PROVISION)

10. PUBLIC NOTICES (MARCH 2004)

APPLICABILITY: This provision is applicable when the cognizant Activity Manager or SO Team determines that the award is of public interest and requests that the provision be included in the award.

It is USAID's policy to inform the public as fully as possible of its programs and activities. The recipient is encouraged to give public notice of the receipt of this award and, from time to time, to announce progress and accomplishments. Press releases or other public notices should include a statement substantially as follows:

"The U.S. Agency for International Development administers the U.S. foreign assistance program providing economic and humanitarian assistance in more than 120 countries worldwide."

The recipient may call on USAID's Bureau for Legislative and Public Affairs for advice regarding public notices. The recipient is requested to provide copies of notices or announcements to the cognizant technical officer and to USAID's Bureau for Legislative and Public Affairs as far in advance of release as possible.

(END OF PROVISION)

11. (RESERVED)

***12. COST SHARING (MATCHING) (JULY 2002)**

APPLICABILITY: This provision, along with 22 CFR 226, is applicable when the recipient has agreed or is required to cost share or provide a matching share.

COST SHARING (MATCHING) (July 2002)

- a. If at the end of any funding period, the recipient has expended an amount of non-Federal funds less than the agreed upon amount or percentage of total expenditures, the Agreement Officer may apply the difference to reduce the amount of USAID incremental funding in the following funding period. If the award has expired or has been terminated, the Agreement Officer may require the recipient to refund the difference to USAID.
- b. The source, origin and nationality requirements and the restricted goods provision established in the Standard Provision entitled "USAID Eligibility Rules for Goods and Services" do not apply to cost sharing (matching) expenditures.

(END OF PROVISION)

**13. PROHIBITION OF ASSISTANCE TO DRUG TRAFFICKERS
(JUNE 1999)**

APPLICABILITY: This provision is applicable where performance of the award will take place in “Covered” Countries, as described in ADS 206 (see 206.5.3)

**PROHIBITION OF ASSISTANCE TO DRUG TRAFFICKERS
(JUNE 1999)**

- a. USAID reserves the right to terminate assistance to, or take other appropriate measures with respect to, any participant approved by USAID who is found to have been convicted of a narcotics offense or to have been engaged in drug trafficking as defined in 22 CFR Part 140.
- b. (1) For any loan over \$1000 made under this agreement, the recipient shall insert a clause in the loan agreement stating that the loan is subject to immediate cancellation, acceleration, recall or refund by the recipient if the borrower or a key individual of a borrower is found to have been convicted of a narcotics offense or to have been engaged in drug trafficking as defined in 22 CFR Part 140.
- (2) Upon notice by USAID of a determination under section (1) and at USAID's option, the recipient agrees to immediately cancel, accelerate or recall the loan, including refund in full of the outstanding balance. USAID reserves the right to have the loan refund returned to USAID.
- c. (1) The recipient agrees not to disburse, or sign documents committing the recipient to disburse, funds to a subrecipient designated by USAID ("Designated Subrecipient") until advised by USAID that: (i) any United States Government review of the Designated Subrecipient and its key individuals has been completed; (ii) any related certifications have been obtained; and (iii) the assistance to the Designated Subrecipient has been approved. Designation means that the subrecipient has been unilaterally selected by USAID as the subrecipient. USAID approval of a subrecipient, selected by another party, or joint selection by USAID and another party is not designation.
- (2) The recipient shall insert the following clause, or its substance, in its agreement with the Designated Subrecipient:

 “The recipient reserves the right to terminate this [Agreement/Contract] or take other appropriate measures if the [Subrecipient] or a key individual of the [Subrecipient] is found to have been convicted of a narcotic offense or to have been engaged in drug trafficking as defined in 22 CFR Part 140.”

(END OF PROVISION)

***14. INVESTMENT PROMOTION (NOVEMBER 2003)**

APPLICABILITY: The following clause is required for grants and cooperative agreements when the program includes gray-area activities or investment-related activities where specific activities are not identified at the time of obligation but could be for investment-related activities, as described in ADS 225 (see 225.3.1.8)

INVESTMENT PROMOTION (NOVEMBER 2003)

- a. Except as specifically set forth in this award or otherwise authorized by USAID in writing, no funds or other support provided hereunder may be used for any activity that involves investment promotion in a foreign country.

- b. In the event the recipient is requested or wishes to provide assistance in the above area or requires clarification from USAID as to whether the activity would be consistent with the limitation set forth above, the recipient must notify the Agreement Officer and provide a detailed description of the proposed activity. The recipient must not proceed with the activity until advised by USAID that it may do so.
- c. The recipient must ensure that its employees and sub-recipients and contractors providing investment promotion services hereunder are made aware of the restrictions set forth in this clause and must include this clause in all contracts and other sub-agreements entered into hereunder.

(END OF PROVISION)

***15. REPORTING OF FOREIGN TAXES (MARCH 2006)**

- a. The recipient must annually submit a report by April 16 of the next year.
- b. Contents of Report. The report must contain:
 - (i) Contractor/recipient name.
 - (ii) Contact name with phone, fax and email.
 - (iii) Agreement number(s).
 - (iv) Amount of foreign taxes assessed by a foreign government [each foreign government must be listed separately] on commodity purchase transactions valued at \$500 or more financed with U.S. foreign assistance funds under this agreement during the prior U.S. fiscal year.
 - (v) Only foreign taxes assessed by the foreign government in the country receiving U.S. assistance is to be reported. Foreign taxes by a third party foreign government are not to be reported. For example, if an assistance program for Lesotho involves the purchase of commodities in South Africa using foreign assistance funds, any taxes imposed by South Africa would not be reported in the report for Lesotho (or South Africa).
 - (vi) Any reimbursements received by the Recipient during the period in (iv) regardless of when the foreign tax was assessed and any reimbursements on the taxes reported in (iv) received through March 31.
 - (vii) Report is required even if the recipient did not pay any taxes during the
 - (viii) Cumulative reports may be provided if the recipient is implementing more than one program in a foreign country.
- c. Definitions. For purposes of this clause:
 - (i) "Agreement" includes USAID direct and country contracts, grants, cooperative agreements and interagency agreements.
 - (ii) "Commodity" means any material, article, supply, goods, or equipment.

- (iii) “Foreign government” includes any foreign governmental entity.
- (iv) “Foreign taxes” means value-added taxes and custom duties assessed by a foreign government on a commodity. It does not include foreign sales taxes.
- d. Where. Submit the reports to: [insert address and point of contact at the Embassy, Mission or FM/CMP as appropriate. see b. below] [optional with a copy to]
- e. Subagreements. The recipient must include this reporting requirement in all applicable subcontracts, subgrants and other subagreements.
- f. For further information see <http://www.state.gov/m/rm/c10443.htm>.

(END OF PROVISION)

***16. FOREIGN GOVERNMENT DELEGATIONS TO INTERNATIONAL CONFERENCES (JANUARY 2002)**

APPLICABILITY: Include this provision in agreements funded from the following accounts:

- Development Assistance, including assistance for sub-Saharan Africa,
- Child Survival and Disease Programs Fund, and
- Micro and Small Enterprise Development Program Account.

FOREIGN GOVERNMENT DELEGATIONS TO INTERNATIONAL CONFERENCES (JANUARY 2002)

Funds in this agreement may not be used to finance the travel, per diem, hotel expenses, meals, conference fees or other conference costs for any member of a foreign government’s delegation to an international conference sponsored by a public international organization, except as provided in ADS Mandatory Reference “Guidance on Funding Foreign Government Delegations to International Conferences or as approved by the Agreement Officer.

These provisions also must be included in the Standard Provisions of any new grant or cooperative agreement to a public international organization or a U.S. or non-U.S. nongovernmental organization financed with FY04 HIV/AIDS funds or modification to an existing grant or cooperative agreement that adds FY04 HIV/AIDS.

(END OF PROVISION)

17. ORGANIZATIONS ELIGIBLE FOR ASSISTANCE (JULY 2004)

APPLICABILITY: This provision must be included in any Request for Application (RFA) or Annual Program Statement (APS) that could lead to a grant or cooperative agreement for activities related to human trafficking funded from any year program resources.

ORGANIZATIONS ELIGIBLE FOR ASSISTANCE (JULY 2004)

The U.S. Government is opposed to prostitution and related activities, which are

inherently harmful and dehumanizing, and contribute to the phenomenon of trafficking in persons. None of the funds made available under this agreement may be used to promote, support or advocate the legalization or practice of prostitution. Nothing in the preceding sentence shall be construed to preclude assistance designed to ameliorate the suffering of, or health risks to, victims while they are being trafficked or after they are out of the situation that resulted from such victims being trafficked. Foreign organizations, whether prime or subrecipients, that receive U.S. Government funds to fight trafficking in persons cannot promote, support or advocate the legalization or practice of prostitution when they are engaged in overseas activities. The preceding sentence shall not apply to organizations that provide services to individuals solely after they are no longer engaged in activities that resulted from such victims being trafficked.

(END OF PROVISION)

18. PROHIBITION ON THE USE OF FEDERAL FUNDS TO PROMOTE, SUPPORT, OR ADVOCATE FOR THE LEGALIZATION OR PRACTICE OF PROSTITUTION - ASSISTANCE (JULY 2004)

APPLICABILITY: This provision must be included in any grant or cooperative agreement that uses funds made available for activities related to human trafficking funded from any year program resources.

PROHIBITION ON THE USE OF FEDERAL FUNDS TO PROMOTE, SUPPORT, OR ADVOCATE FOR THE LEGALIZATION OR PRACTICE OF PROSTITUTION - ASSISTANCE (JULY 2004)

- a. The U.S. Government is opposed to prostitution and related activities, which are inherently harmful and dehumanizing, and contribute to the phenomenon of trafficking in persons. None of the funds made available under this agreement may be used to promote, support, or advocate the legalization or practice of prostitution. Nothing in the preceding sentence shall be construed to preclude assistance designed to ameliorate the suffering of, or health risks to, victims while they are being trafficked or after they are out of the situation that resulted from such victims being trafficked.
- b. [This subsection (b) only applies to foreign non-governmental organizations and PIOs receiving U.S. Government funds to carry out programs that target victims of severe forms of trafficking as either prime awardees or subawardees.]

(1) For programs that target victims of severe forms of trafficking, as a condition of entering into this agreement or subagreement, the recipient/subrecipient agrees that in its activities outside of the United States and its possessions it does not promote, support, or advocate the legalization or practice of prostitution. The preceding sentence shall not apply to organizations that provide services to individuals solely after they are no longer engaged in activities that resulted from such victims being trafficked.

(2) The following definitions apply for purposes of this clause:

FOREIGN NON-GOVERNMENTAL ORGANIZATION – The term “foreign nongovernmental organization” means an entity that is not organized under the laws of any State of the United States, the District of Columbia or the Commonwealth of Puerto Rico.

SEVERE FORMS OF TRAFFICKING IN PERSONS. -- The term “severe forms of trafficking in persons” means—

(A) sex trafficking in which a commercial sex act is induced by force, fraud, or coercion, or in which the person induced to perform such act has not attained 18 years of age; or

(B) the recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage, or slavery.

(C) The recipient shall insert this provision in all sub-agreements under this award.

(D) This provision includes express terms and conditions of the agreement and any violation of it shall be grounds for unilateral termination, in whole or in part, of the agreement by USAID prior to the end of its term.

(END OF PROVISION)

***19. ORGANIZATIONS ELIGIBLE FOR ASSISTANCE (JUNE 2005)**

APPLICABILITY: This provision must be included in any agreement financing HIV/AIDS activities.

ORGANIZATIONS ELIGIBLE FOR ASSISTANCE (JUNE 2005)

An organization that is otherwise eligible to receive funds under this agreement to prevent, treat, or monitor HIV/AIDS shall not be required to endorse or utilize a multisectoral approach to combating HIV/AIDS, or to endorse, utilize, or participate in a prevention method or treatment program to which the organization has a religious or moral objection.

(END OF PROVISION)

***20. CONDOMS (JUNE 2005)**

APPLICABILITY: This provision must be included in any agreement financing HIV/AIDS activities.

CONDOMS (JUNE 2005)

Information provided about the use of condoms as part of projects or activities that are funded under this agreement shall be medically accurate and shall include the public health benefits and failure rates of such use and shall be consistent with USAID's fact sheet entitled, "USAID: HIV/STI Prevention and Condoms. This fact sheet may be accessed at:

http://www.usaid.gov/our_work/global_health/aids/TechAreas/prevention/condomfactsheet.html

(END OF PROVISION)

***21. PROHIBITION ON THE PROMOTION OR ADVOCACY OF THE LEGALIZATION OR PRACTICE OF PROSTITUTION OR SEX TRAFFICKING (JUNE 2005)**

APPLICABILITY: This provision must be included in any agreement financing HIV/AIDS activities.

PROHIBITION ON THE PROMOTION OR ADVOCACY OF THE LEGALIZATION OR PRACTICE OF PROSTITUTION OR SEX TRAFFICKING (JUNE 2005)

- a. The U.S. Government is opposed to prostitution and related activities, which are inherently harmful and dehumanizing, and contribute to the phenomenon of trafficking in persons. None of the funds made available under this agreement may be used to promote or advocate the legalization or practice of prostitution or sex trafficking. Nothing in the preceding sentence shall be construed to preclude the provision to individuals of palliative care, treatment, or post-exposure pharmaceutical prophylaxis, and necessary pharmaceuticals and commodities, including test kits, condoms, and, when proven effective, microbicides.
- b. Except as noted in the second sentence of this paragraph, as a condition of entering into this agreement or any subagreement, a non-governmental organization or public international organization recipient/subrecipient must have a policy explicitly opposing prostitution and sex trafficking. The following organizations are exempt from this paragraph: the Global Fund to Fight AIDS, Tuberculosis and Malaria; the World Health Organization; the International AIDS Vaccine Initiative; and any United Nations agency.
- c. The following definition applies for purposes of this provision:
Sex trafficking means the recruitment, harboring, transportation, provision, or obtaining of a person for the purpose of a commercial sex act. 22 U.S.C. 7102(9).
- d. The recipient shall insert this provision, which is a standard provision, in all subagreements.
- e. This provision includes express terms and conditions of the agreement and any violation of it shall be grounds for unilateral termination of the agreement by USAID prior to the end of its term.

(END OF PROVISION)

22. USAID DISABILITY POLICY - ASSISTANCE (DECEMBER 2004)

APPLICABILITY: This provision must be included in Request for Applications (RFAs), and in awards.

USAID DISABILITY POLICY - ASSISTANCE (DECEMBER 2004)

- a. The objectives of the USAID Disability Policy are (1) to enhance the attainment of United States foreign assistance program goals by promoting the participation and equalization of opportunities of individuals with disabilities in USAID policy, country and sector strategies, activity designs and implementation; (2) to increase awareness of issues of people with disabilities both within USAID programs and in host countries; (3) to engage other U.S. government agencies, host country counterparts, governments, implementing organizations and other donors in fostering a climate of nondiscrimination against people with disabilities; and (4) to support international advocacy for people with disabilities. The full text of the policy paper can be found at the following website:
http://pdf.dec.org/pdf_docs/PDABQ631.pdf

- b. USAID therefore requires that the recipient not discriminate against people with disabilities in the implementation of USAID funded programs and that it make every effort to comply with the objectives of the USAID Disability Policy in performing the program under this grant or cooperative agreement. To that end and to the extent it can accomplish this goal within the scope of the program objectives, the recipient should demonstrate a comprehensive and consistent approach for including men, women and children with disabilities.

(END OF PROVISION)

**23. STANDARDS FOR ACCESSIBILITY FOR THE DISABLED IN
USAID ASSISTANCE AWARDS INVOLVING CONSTRUCTION
(SEPTEMBER 2004)**

APPLICABILITY: This provision must be included in Request for Applications (RFAs) and in awards involving construction.

**STANDARDS FOR ACCESSIBILITY FOR THE DISABLED IN USAID ASSISTANCE
AWARDS INVOLVING CONSTRUCTION (SEPTEMBER 2004)**

- a. One of the objectives of the USAID Disability Policy is to engage other U.S. government agencies, host country counterparts, governments, implementing organizations and other donors in fostering a climate of nondiscrimination against people with disabilities. As part of this policy USAID has established standards for any new or renovation construction project funded by USAID to allow access by people with disabilities (PWDs). The full text of the policy paper can be found at the following website: http://pdf.dec.org/pdf_docs/PDABQ631.pdf.
- b. USAID requires the recipient to comply with standards of accessibility for people with disabilities in all structures, buildings or facilities resulting from new or renovation construction or alterations of an existing structure.
- c. The recipient will comply with the host country or regional standards for accessibility in construction when such standards result in at least substantially equivalent accessibility and usability as the standard provided in the Americans with Disabilities Act (ADA) of 1990 and the Architectural Barriers Act (ABA) Accessibility Guidelines of July 2004. Where there are no host country or regional standards for universal access or where the host country or regional standards fail to meet the ADA/ABA threshold, the standard prescribed in the ADA and the ABA will be used.
- d. New Construction. All new construction will comply with the above standards for accessibility.
- e. Alterations. Changes to an existing structure that affect the usability of the structure will comply with the above standards for accessibility unless the recipient obtains the Agreement Officer's advance approval that compliance is technically infeasible or constitutes an undue burden or both. Compliance is technically infeasible where structural conditions would require removing or altering a load-bearing member that is an essential part of the structural frame or because other existing physical or site constraints prohibit modification or addition of elements, spaces, or features that are in full and strict compliance with the minimum requirements of the standard. Compliance is an undue burden where it entails either a significant difficulty or expense or both.
- f. Exceptions. The following construction related activities are excepted from the requirements of paragraphs (a) through (d) above:

- (1) Normal maintenance, re-roofing, painting or wall papering, or changes to mechanical or electrical systems are not alterations and the above standards do not apply unless they affect the accessibility of the building or facility; and
- (2) Emergency construction (which may entail the provision of plastic sheeting or tents, minor repair and upgrading of existing structures, rebuilding of part of existing structures, or provision of temporary structures) intended to be temporary in nature. A portion of emergency construction assistance may be provided to people with disabilities as part of the process of identifying disaster- and crisis-affected people as “most vulnerable.”

(END OF PROVISION)

ANNEXES

Annex A: Conditions of Registration for U.S. Organizations

Annex B: TB Elements and Sub-Elements

Annex C: TB Indicators

Annex D: USAID Mission Contact List & Addresses

Annex E: Application Screening Form

Annex F: Beneficiary Calculation Guidelines

Annex G: Program Matrix

Annex H: SF 424 Forms

Annex A: Conditions of Registration for U.S. Organizations

Conditions of Registration for U.S. Organizations

There are eight Conditions of Registration for U.S. organizations. The first four Conditions relate to whether an organization meets the definition of a U.S. PVO as set forth in 22 CFR Part 203, while the last four Conditions establish standards by which the U.S. PVO is evaluated. An applicant must be registered with USAID as a U.S. PVO if USAID finds that the applicant has satisfied all of the following Conditions:

Condition No. 1 (U.S. based).

Is U.S. based in that it:

- (1) Is organized under the laws of the United States; and
- (2) Has its headquarters in the United States.

Condition No. 2 (Private).

Is a nongovernmental organization (NGO) and solicits and receives cash contributions from the U.S. general public

Condition No. 3 (Voluntary).

Is a charitable organization in that it:

- (1) Is nonprofit and exempt from Federal income taxes under Section 501(C)(3) of the Internal Revenue Code; and
- (2) Is not a university, college, accredited degree-granting institution of education, private foundation, hospital, organization established by a major political party in the United States, organization established, funded and audited by the U.S. Congress, organization engaged exclusively in research or scientific activities, church, synagogue, mosque or other similar entity organized primarily for religious purposes.

Condition No. 4 (Overseas Program Activities).

Conducts, or anticipates conducting, overseas program activities that are consistent with the general purposes of the Foreign Assistance Act and/or Public Law 480.

Condition No. 5 (Board of Directors).

Has a governing body:

- (1) That meets at least annually;
- (2) Whose members do not receive any form of income for serving on the board; and
- (3) Whose majority is not composed of the PVO's officers or staff members.

Condition No. 6 (Financial Viability).

That it:

- (1) Accounts for its funds in accordance with generally accepted accounting principles (GAAP);
- (2) Has a sound financial position;
- (3) Provides its financial statements to the public upon request; and
- (4) Has been incorporated for not less than 18 months.

Condition No. 7 (Program Activities vs. Supporting Services).

That it:

- (1) Expends and distributes its funds in accordance with the annual report of program activities;
- (2) Does not expend more than 40 percent of total expenses on supporting services.
- (3) In order to maintain its registration, conducts international program activities within the last three years. For example, if a U.S. PVO did not have any international activities for 2004, the current year, or 2003, but did have activities in 2002, then it would remain registered. However, if it did not have any international activities in 2005, USAID would remove it from the Registry in 2006 because for the previous three years (2003, 2004, 2005), it did not conduct any international activities.

Condition No. 8 (General Eligibility).

It is not:

- (1) Suspended or debarred by an agency of the U.S. Government;
- (2) Designated as a foreign terrorist organization by the Secretary of State, pursuant to Section 219 of the Immigration and Nationality Act, as amended; or
- (3) The subject of a decision by the Department of State to the effect that registration or a financial relationship between USAID and the organization is contrary to the national defense, national security, or foreign policy interests of the United States.

Where to Register

The Office of Private Voluntary Cooperation-American Schools and Hospitals Abroad (PVCASHA) in the Bureau for Democracy, Conflict and Humanitarian Assistance (DCHA) registers U.S. PVOs and IPVOs. PVC-ASHA serves as the focal point for maintaining a productive partnership between USAID and the PVO community. Organizations interested in applying for registration are encouraged to visit our Web site at www.usaid.gov Keyword: PVC-ASHA. Applications are submitted to the following address:

Registrar

U.S. Agency for International Development

DCHA/PVC-ASHA/PPO, Room 7.06-091

1300 Pennsylvania Avenue, NW

Washington, DC 20523-7600

Annex B: Tuberculosis Element and Sub-Elements

Program Element 3.1.2: Tuberculosis

Sub-Element 3.1.2.1: DOTS Expansion and Enhancement

Sub-Element 3.1.2.2: Drugs for the Treatment of TB

Sub-Element 3.1.2.3: Improve Management of TB/HIV

Sub-Element 3.1.2.4: Multi Drug Resistant TB (MDR TB)

Sub-Element 3.1.2.5: Care and Support

Sub-Element 3.1.2.6: Development of New Tools and Improved Approaches

Sub-Element 3.1.2.7: Health Governance and Finance (TB)

Sub-Element 3.1.2.8: Host Country Strategic Information Capacity

Sub-Element 3.1.2.9: Program Design and Learning

Tuberculosis Element and Sub-Element Definitions

Program Element 3.1.2: Tuberculosis

Definition: Reduce the number of deaths caused by TB by increasing detection of cases of TB and by successfully treating detected cases, as well as addressing issues of multi-drug resistant TB, TB and HIV, and investing in new tools for TB.

Sub-Element 3.1.2.1: DOTS Expansion and Enhancement

Definition: Support political commitment and sustained financing for TB treatment with supervision and patient support; ensuring capacity of TB programs to manage drugs and other commodities; monitoring and evaluation; ; interventions to improve DOTS quality; and engagement of all public and private providers in DOTS.

Sub-Element 3.1.2.2: Drugs for the Treatment of TB

Definition: Procurement of first or second-line drugs to treat TB. Includes the costs of goods; freight; insurance to port; clearance costs (temporary storage, required quality assurance testing) and transport to district/regional warehouses.

Sub-Element 3.1.2.3: Improve Management of TB/HIV

Definition: Build capacity for joint TB/HIV planning, monitoring, and evaluation; surveillance of HIV prevalence in TB patients; active TB case finding in people living with HIV/AIDS (PLWHA); HIV counseling and testing in TB patients; cotrimoxazole preventive therapy;

referral of HIV+ TB patients to ARV treatment services; isoniazid preventive therapy; and TB infection control in health facilities and congregate settings.

Sub-Element 3.1.2.4: Multi Drug Resistant TB (MDR TB)

Definition: Introduce and expand DOTS Plus for MDR TB including detection, diagnosis, and treatment of drug resistant TB; measures to detect, diagnose and treat extensively drug resistant TB (XDR TB), and containment of XDR TB outbreaks; drug resistance surveillance; TB infection control in health facilities and congregate settings

Sub-Element 3.1.2.5: TB Care and Support

Definition: Support for men and women affected by TB to improve early access to treatment and care, especially among the poor; empower TB patients and communities; and encourage community civil society participation in TB care, with special attention to decreasing stigma and discrimination, using communication and social mobilization, and the introduction of international standards of care and TB patient charters.

Sub-Element 3.1.2.6: Development of New Tools and Improved Approaches

Definition: Support Phase IIB clinical trials and beyond in the areas of new drugs, diagnostics, vaccines; development of clinical trial capacity; operations research to improve approaches to treatment and care.

Sub-Element 3.1.2.7: Health Governance and Finance (TB)

Definition: Promote sustainable improvements in health outcomes for men/boys and women/girls by reducing key governance and financing constraints to the achievement of multiple health element objectives and the health area goal overall. These include activities that reduce corruption; increase equity; improve efficiency and increase financial protection (especially for underserved populations), including in the context of financing, organization of services, facility construction/renovation, pharmaceutical management, human capacity development and management, and strategic information. Note: Operating Units should make efforts to report activities that address specific earmarks under other sub-elements, reserving the use of the health governance and finance sub-element for overarching activities that support multiple health elements.

Sub-Element 3.1.2.8: Host Country Strategic Information Capacity

Definition: Establish and/or strengthen host country TB management information systems (MIS) and their development and use of tools and models to collect, analyze and disseminate a variety of information related to the program element. These may include, but are not limited to MIS for government ministries or other host country institutions, needs assessments, baseline studies, censuses and surveys, targeted evaluations, special studies, routine surveillance, data quality assessments, and operational research. This sub-element may also include developing and disseminating best practices and lessons learned and testing demonstration and/or pilot models. Related training, supplies, equipment, and non-USG personnel are included.

Sub-Element 3.1.2.9: Program Design and Learning

Definition: Develop and conduct needs assessments, baseline studies, targeted evaluations, special studies or other information-gathering efforts specifically for the design, monitoring and evaluation of USG-funded programs. This sub-element may also include developing and disseminating best practices and lessons learned and testing demonstration and/or pilot models or the preparation of strategic plans and other short-term programming tasks. Note: All such activities that are carried out by partners as an integral part of their monitoring and evaluation efforts for programs funded under other sub-elements should be included within those sub-elements (e.g. ICASS costs).

<http://www.state.gov/documents/organization/101764.pdf>

Annex C: TB Indicators

Operational indicators for NGO/PVO projects to strengthen TB service delivery and community-based TB activities

Indicators	Comments	
<u>Political commitment</u> <ul style="list-style-type: none"> • Proportion of government budget for TB services. • Number of government staff for essential TB services (microscopy, DOT, supervision, monitoring) (trend) • Number of local PVO and community groups supporting TB (trend) 		Includes the expansion of project activities by government; absorption of project staff and/or staff functions by the public system; and increased public funding or staffing resulting from PVO/NGO efforts.
<u>Coverage at district level:</u> <ul style="list-style-type: none"> • Number of health facilities with DOTS services ¹⁰ / total number of health facilities • Average number of square kilometers for a health facility catchment area providing TB treatment, diagnosis, or both services. • Population by TB microscopy unit and per microscopy reader 	<p>At least for public health facilities, but may include NGO and private sector facilities.</p> <p>There should be adequate access to diagnosis and treatment facilities for the community.</p> <p>One microscopy laboratory (one microscopist) per 100,000–200,000 inhabitants (light microscopy), depending of the workload and population density.</p>	Indicators of patient access. TB treatment should be provided at least by all public primary health care facilities, and DOT expanded to the community through community health workers or volunteers. Microscopy access may be expanded through organizing collection of and regularly sending sputum samples (or prepared slides) to the laboratory, and the use of suspect registers.
<u>Diagnosis and case detection</u> <ul style="list-style-type: none"> • Notification 	Trend of total and pulmonary smear-positive TB cases reported. Quarterly and annual.	There is no target. In a good program the smear-positive cases reported should initially increase and then decrease, due to decrease of TB prevalence in the community.

¹⁰ Providing TB diagnosis and/or treatment according to national norms.

<ul style="list-style-type: none"> Number of TB suspects examined by sputum microscopy 	<p>This is a rapid indicator of case detection. It is the number of persons examined for diagnosis by microscopy obtained from the laboratory register or, in facilities without a laboratory, from a suspect register. About 5% of the adults attending outpatient facilities for any reason have cough of over 2 weeks.</p> <p>It is complemented by the positivity rate (% of persons examined that have positive sputum smears). The positivity is usually 5–15% in general facilities and ~20% in specialized TB or respiratory clinics, it should decrease with improved patient access and outpatient care, and with community mobilization.</p>	<p>The trend is very useful for measuring impact in small areas and short-term projects. The number should increase as a result of community participation, ACSM, and involvement of private practitioners.</p> <p>A more complete indicator at health facility level is the % of adult outpatients with cough >2 weeks and % examined by sputum microscopy. Operational research (rapid and not costly) can give the real prevalence in adult outpatients.</p>
<p><u>Diagnostic quality</u></p> <ul style="list-style-type: none"> Proportion of TB cases with bacteriological confirmation 	<p>Number of smear-positive cases/Total pulmonary TB</p> <p>Number of smear-positive cases /Total TB cases.</p>	<p>Indicator of medical criteria. Over 50% of all cases and over two-thirds of pulmonary TB should be sputum smear-positive</p>
<ul style="list-style-type: none"> Number of smears done and average per microscopist / day 	<p>For staff and laboratory planning and to ensure quality. The optimum is more than 2 and less than 20 smears read per day per microscopist (light microscopy).</p>	<p>It can be obtained monthly or annually, directly from the laboratory register.</p>
<ul style="list-style-type: none"> Proportion of major errors ¹¹ in TB microscopy 	<p>Based on re-reading of a sample of slides by a reference laboratory. There are various valid systems to select the sample. Less than 1% error is desirable.</p>	<p>The existence of any system of quality assurance (QA) is essential to ensure microscopy quality.</p>

¹¹ Reporting negative for positive or vice-versa.

<p><u>Treatment quality</u></p> <ul style="list-style-type: none"> Cohort analysis of treatment outcomes, mainly for new smear positive pulmonary cases 	<p>% of cases cured and % of treatment completed (added is the % of treatment success) % failure, % default, % death, % transfers. Quarterly or annual. The same analysis can be done for re-treatments (defaults, relapses and failures in separate); and for chronic and MDR.</p>	<p>Treatment success (global target >85%) and default (target <5%) are the most useful. In areas with high HIV infection, deaths during treatment is an indicator of appropriate TB/HIV case management. The results are too late to monitor impact of most PVO/NGO project grants.</p>
<ul style="list-style-type: none"> Sputum conversion rate 	<p>It is a rapid indicator—a surrogate for the success rate. Proportion of new smear-positive patients that were examined by sputum microscopy and showed smear negativity 2 or 3 months after starting treatment.</p>	<p>It measures the capacity to keep patients on treatment during the initial phase, control their evolution, and reduce the number of bacilli.</p>
<p><u>Knowledge, attitudes, and practices</u></p> <ul style="list-style-type: none"> % change in KAP % of patients that participated in the selection of their DOT provider and place of treatment (staff practices) Number of patients referred for treatment by private providers to the public health facilities (trend) % of patients on DOT 	<p>Repeated KAP or focus group studies: - Population knowledge that long duration cough may be TB, that TB is curable, and that treatment is free of charge in public facilities or interventions. - TB patient knowledge about treatment duration. DOT is defined as direct observation of drug intake by another person (in a health facility, by health staff, by community health workers or volunteers, or by family members).</p>	<p>The main objective is to change behavior (practices) to accelerate diagnosis and facilitate compliance with treatment. A major objective is to test methods to facilitate DOT for the patient, and observe their efficacy through treatment outcome. Partial DOT or self-administered doses with community support should be documented and evaluated.</p>
<p><u>TB/HIV</u></p> <ul style="list-style-type: none"> % of TB patients tested for HIV % of new TB patients positive for HIV % of TB/HIV patients on CPT Number of TB/HIV patients on ART % deaths during TB treatment 	<p>For areas where the prevalence of HIV in the community and in TB patients is high, the recommended policy is to offer HIV testing to all TB patients, to treat all HIV-infected TB patients with CPT, and to provide ART as per national guidelines.</p>	<p>They measure the capacity to treat HIV infection in TB patients, and to reduce deaths during TB treatment.</p>

Annex D: USAID Mission Contact List & Addresses

<u>Country</u>	<u>Contact Name, title</u>	<u>Official Address</u>	<u>Commercial Address</u>
<u>New Partner, Innovation Categories</u>			
<u>ASIA NEAR EAST</u>			
Afghanistan	Faiz Mohammad Health Team Leader fmohammad@usaid.gov 873-762-311-955 202.216.6288	USAID/Afghanistan 6180 Kabul Place Dulles, VA 20189-6180	USAID/Afghanistan U.S. Embassy Cafe Compound Great Masood Road Kabul, Afghanistan
Bangladesh	Dr. Sukumar Sarker Project Management Specialist ssarker@usaid.gov 8855500-22 Ext. 2313	USAID/Bangladesh Department of State Washington, DC 20521-6120	USAID/Bangladesh Madani Avenue Baridhara Dhaka 1212 Bangladesh
Cambodia	Mary Lynn McKeon Team Leader, Maternal Child and Reproductive Health mmckeon@usaid.gov 855-23-728316	USAID/Cambodia US Embassy # 1 Street 96 Phnom Penh, Cambodia	USAID Cambodia US Embassy # 1 Street 96 Phnom Penh, Cambodia
East Timor	Teodulo Ximenes Health Officer tximenes@usaid.gov 670 332-2211/2, Ext. 2032	USAID/ East Timor 8250 Dili Place Washington, DC 20521-8250	USAID/East Timor Dr. Sergio Vieira de Mello Road Lighthouse Area, Farol Dili, Timor-Leste
India	Manju Ranjan Seth Program Management Associate mranjan@usaid.gov 2419 8400 (X: 8491)	USAID/New Delhi Department of State Washington, DC 20521-6120	USAID/ India American Embassy Chanakypuri New Delhi 110 021 India
Indonesia	Charles Oliver Health Team Leader coliver@usaid.gov (6221) 3435-9394	USAID/Indonesia American Embassy Jakarta Unit 8135 APO AP 96520	USAID/Indonesia American Embassy Jakarta Unit 8135 APO AP 96520

<u>Country</u>	<u>Contact Name, title</u>	<u>Official Address</u>	<u>Commercial Address</u>
Laos	Cathy Jane Bowes Director, Office of Public Health cbowes@usaid.gov 662-263-7404	USAID/Regional Development Mission American Embassy Bangkok Unit 8135 USAID APO AP 96546	USAID/Regional Dev. Mission Asia Diethelm Towers Tower A Third Floor Suite 303 93/1 Wireless RD Bangkok 10330 Laos
Nepal	Dharmpal Raman Program Specialist draman@usaid.gov +977-1-400-7200 Ext. 4147	USAID/Kathmandu Department of State Washington, DC 20521-6330	USAID P.O. Box 295 US Embassy Mission Maharajgunj, Chakrapath Kathmandu Nepal
Papua New Guinea	Cathy Jane Bowes Director, Office of Public Health cbowes@usaid.gov 662-263-7404	USAID/Regional Development Mission/Asia American Embassy Bangkok Unit 8135 USAID APO AP 96546	USAID/US Regional Dev. Mission Asia Diethelm Towers, Tower A Third Floor, Suite 303, 93/1 Wireless RD Bangkok 10330 Papua
Philippines	Maria Paz G. de Sagun Deputy Chief, Office of Health mde@usaid.gov (632) 552-9866	USAID/Philippines P.O.Box EA423 1000 Ermita Manila Philippines	USAID/Philippines PSC 502 Box 1 FPO AP 96515-1200
Thailand	Cathy Jane Bowes Director, Office of Public Health cbowes@usaid.gov 662-263-7404	USAID/Regional Development Mission/Asia American Embassy Bangkok Unit 8135 USAID APO AP 96546	USAID/Regional Dev. Mission/Asia Diethelm Towers Tower A 3rd Fl, Suite 303 93/1 Wireless Road Bangkok 10330 Thailand
Vietnam	Loi Tien Ngo Development Specialist Ingo@usaid.gov 84-4-935-1260	USAID/Vietnam 4550 Hanoi Place Washington, DC 20521-4550	USAID/Vietnam 15/F Tung Shing Square #2 Ngo Quyen Street Hanoi, Vietnam
Yemen	Iman Awad Senior Health Advisor and Team Leader awadia@state.gov 00-9671-755-2084	USAID/Yemen Department of State Washington, DC 20521-6330	USAID/Yemen c/o American Embassy Sa'awan Street P.O. Box 22347 Sanaa Yemen

<u>Country</u>	<u>Contact Name, title</u>	<u>Official Address</u>	<u>Commercial Address</u>
<u>AFRICA</u>			
Angola	Francesca Nelso Deputy Director of Technical Programs fnelson@usaid.gov 244-222-641-008	USAID/LUANDA Department of State Washington, DC 20521-6330	USAID/Angola c/o U.S. Embassy Rua Houari Boumedienne #32 Miramar Luanda, Angola
Benin	Pascal Zinzindohoue Family Health Team Leader pazinzindohoue@usaid.gov 229-21-30-05-00	USAID 2120 Cotonou PL Washington DC 20521	USAID/Benin Ambassade Americaine 01 B.P. 2012 Cotonou Benin
Burkina Faso	Paul Hoedom Sossa Senior Reproductive and Family Health Specialist psossa@usaid.gov 00-233-21-741-200 00-233-244-329-941	USAID/WARP Department of State Washington, DC 20521-2010	USAID/Burkina Faso (WARP) E. 45/3 Independence Avenue P.O. Box 1630 Accra, Burkina
Burundi	Dr. Donatien Ntakarutimana MD, MPH Program Development Specialist (Health) NtakarutimanandM@state.gov 257-222-436-25	USAID/Bujumbura Department of State APO AE 09831-4102 Washington, DC	USAID/Burundi co/US Embassy Bujumbura Burundi 1 Avenue des Etats- Unis P.O. Box 1720 Bujumbura Bujumbura Burundi
Cameroon	Paul Hoedom Sossa Senior Reproductive and Family Health Specialist psossa@usaid.gov 00-233-21-741-200 00-233-244-329-941	USAID/WARP Department of State Washington, DC 20521-2010	USAID/Cameroon (WARP) E. 45/3 Independence Avenue P.O. Box 1630 Accra, Cameroon
Cape Verde	Paul Hoedom Sossa Senior Reproductive and Family Health Specialist psossa@usaid.gov 00-233-21-741-200 00-233-244-329-941	USAID/WARP Department of State Washington, DC 20521-2010	USAID/Cape Verde (WARP) E. 45/3 Independence Avenue P.O. Box 1630 Accra, Cape Verde

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Chad	Paul Hoedom Sossa Senior Reproductive and Family Health Specialist psossa@usaid.gov 00-233-21-741-200 00-233-244-329-941	USAID/WARP Department of State Washington, DC 20521-2010	USAID/Chad (WARP) E. 45/3 Independence Avenue P.O. Box 1630 Accra, Chad
Cote d'Ivoire	Paul Hoedom Sossa Senior Reproductive and Family Health Specialist psossa@usaid.gov 00-233-21-741-200 00-233-244-329-941	USAID/WARP Department of State Washington, DC 20521-2010	USAID/Cote d'Ivoire (WARP) E. 45/3 Independence Avenue P.O. Box 1630 Accra, Cote
Ethiopia	Dr. Mulugeta Wolde Yohannes Public Health Specialist mwyohannes@usaid.gov 251-11-551-0088 Ext. 231	USAID/Addis Ababa Department of State Washington, DC 0521-2030	USAID/Ethiopia Riverside Building, off Haile G/Selassie Rd. P.O. Box 1014 Addis Ababa Ethiopia
Equatorial Guinea	Paul Hoedom Sossa Senior Reproductive and Family Health Specialist psossa@usaid.gov 00-233-21-741-200 00-233-244-329-941	USAID/WARP Department of State Washington, DC 20521-2010	USAID/Equatorial Guinea (WARP) E. 45/3 Independence Avenue P.O. Box 1630 Accra, Equatorial Guinea
Gabon	Paul Hoedom Sossa Senior Reproductive and Family Health Specialist psossa@usaid.gov 00-233-21-741-200 00-233-244-329-941	USAID/WARP Department of State Washington, DC 20521-2010	USAID/Gabon (WARP) E. 45/3 Independence Avenue P.O. Box 1630 Accra, Gabon
The Gambia	Paul Hoedom Sossa Senior Reproductive and Family Health Specialist psossa@usaid.gov 00-233-21-741-200 00-233-244-329-941	USAID/WARP Department of State Washington, DC 20521-2010	USAID/The Gambia (WARP) E. 45/3 Independence Avenue P.O. Box 1630 Accra, The Gambia

Country	Contact Name, title	Official Address	Commercial Address
Ghana	Juliana A. Pwamang Health Program Specialist jpwanang@usaid.gov 233-21-741-200 Ext. 1719 233-21-741-719	USAID/WARP Department of State Washington, DC 20521-2010	USAID/Ghana No. 24 Fourth Circular Rd Cantonments P. O. Box 1630 Accra, Ghana West Africa
Guinea	Dr. Mariama Cire Bah, MD, MPH Reproductive Health Specialist mbah@usaid.gov (224) 65 10 40 00 Ext. 4688 (224) 64 45 17 34	USAID/Guinea Department of State 2110 Conakry Place Washington DC. 20521-2110	USAID/Guinea c/o American Embassy Centre Administrative Koloma Transversale No. 2 BP 603 Conakry Repulic of Guinea
Guinea-Bissau	Paul Hoedom Sossa Senior Reproductive and Family Health Specialist psossa@usaid.gov 00-233-21-741-200 00-233-244-329-941	USAID/WARP Department of State Washington, DC 20521-2010	USAID/Guinea Bissau(WARP) E. 45/3 Independence Avenue P.O. Box 1630 Accra, Guinea Bissau
Kenya	Dr. Sheila N. Macharia Reproductive Health Serices Specialist smacharia@usaid.gov 254.20.862.2234	USAID/Kenya Unit 64102 APO AE 09831-4102	USAID/Kenya c/o US Embassy United Nations Avenue Gigiri Nairobi, Kenya
Liberia	Christopher McDermott Health Team Leader cmcdermott@usaid.gov 231-770-54826 ext. 1829	USAID/Monrovia Department of State Washington, DC 20521-2010	USAID/West Africa Regional Mission E. 45/3 Independence Avenue P.O.Box 1630 Accra, Liberia
Madagascar	Benjamin Andriamitantsoa Child Survival, Nutrition and Family Planning Manager bandriamitantsoa@usaid.gov 261.20.22.539.20	USAID/Antananarivo Department of State Washington, DC 20521-2040	USAID/Madagascar Tour Zital, 6th floor ZI Taloumis Ankorondrano B.P. 5253 Antananarivo, Madagascar
Malawi	Catherine Chipazi Child Health Specialist cchipazi@usaid.gov 265-1-772-455	USAID/Malawi P.O. Box 30455 Lilongwe 3.Malawi	USAID/Malawi NICO House City Centre Lilongwe Malawi

<u>Country</u>	<u>Contact Name, title</u>	<u>Official Address</u>	<u>Commercial Address</u>
Mali	Bob de Wolfe Deputy Team Leader - Health bdewolf@usaid.gov 223-270-2728	USAID/Bamako Department of State Washington, DC 20521-2010	USAID/Mali US Embassy BP 34 Bamako
Mauritania	Paul Hoedom Sossa Senior Reproductive and Family Health Specialist psossa@usaid.gov 00-233-21-741-200 00-233-244-329-941	USAID/WARP Department of State Washington, DC 20521-2010	USAID/Mauritania (WARP) E. 45/3 Independence Avenue P.O. Box 1630 Accra, Mauritania
Mozambique	Jeri Dible Population, Health, Nutrition Officer jdible@usaid.gov 258-213-250-66	USAID/ Mozambique 2330 Maputo Place Dulles, VA 20189	USAID/Mozambique JAT Complex, Rua 1231, No. 41 P.O. Box 73 Maputo Mozambique
Namibia	Sangita Patel Health and Development Officer spatal@usaid.gov 264-61-273-710	USAID/Namibia 2540 Windhoek Place Dulles, VA 20189	USAID/Namibia Channel Life Tower 6th Floor 39 Post Street Mall Windhoek, Namibia
Niger	Paul Hoedom Sossa Senior Reproductive and Family Health Specialist psossa@usaid.gov 00-233-21-741-200 00-233-244-329-941	USAID/WARP Department of State Washington, DC 20521-2010	USAID/Niger(WARP) E. 45/3 Independence Avenue P.O. Box 1630 Accra, Niger
Nigeria	Garba Adbu Senior Program Manager, Child Survival gabdu@usaid.gov 234-9-461-9389	USAID/Nigeria 7-9 Mambilla Street Abuja Nigeria	USAID/Nigeria P.M.B 519 Garki Abuja Nigeria
Rwanda	Patrick Condo Malaria Program Specialist pcondo@usaid.gov 250-596-800	USAID/Kigali Department of State Washington, DC 20521-2210	USAID/Rwanda 55 Avenue Paul VI Kigali Rwanda

<u>Country</u>	<u>Contact Name, title</u>	<u>Official Address</u>	<u>Commercial Address</u>
Sao Tome/Principe	Paul Hoedom Sossa Senior Reproductive and Family Health Specialist psossa@usaid.gov 00-233-21-741-200 00-233-244-329-941	USAID/WARP Department of State Washington, DC 20521-2010	USAID/Sao Tome/Principe(WARP) E. 45/3 Independence Avenue P.O. Box 1630 Accra Sao Tome/Principe
Senegal	Amadou Baye Mbow MCH Specialist ambow@usaid.gov 221-33-869-6194	USAID/Dakar Department of State Washington, DC 20521-2010	USAID/Senegal Ngor Diarama, Petit Ngor B.P. 49 Dakar, Senegal
Sierra Leone	Paul Hoedom Sossa Senior Reproductive and Family Health Specialist psossa@usaid.gov 00-233-21-741-200 00-233-244-329-941	USAID/WARP Department of State Washington, DC 20521-2010	USAID/Sierra Leone (WARP) E. 45/3 Independence Avenue P.O. Box 1630 Accra, Sierra Leone
Somalia	Marua Barry Somalia Program Manager mabarry@usaid.gov 254-20-862-20-00 Ext. 2205	Somalia Field Ofc. REDSO/ESA Department of State Washington, DC20521-8900	USAID/Somalia USAID Nairobi Complex Annex c/o American Embassy United Nations Avenue Gigiri Nairobi Somalia
South Africa	Anne Gaven Population, Health and Nutrition Officer ageven@usaid.gov 012-452-2245	USAID/South Africa P.O. Box 43 Pretoria 0027	USAID/Pretoria 100 Totius Street Groenkloof Pretoria
Sudan	Khakijat L. Mojidi Health Office/Team Leader kmojidi@usaid.gov 202-216-6279 Ext. 113	American Embassy/USAID Unit 63900 APO AE 09829-3900	USAID/Sudan USAID Nairobi Complex Annex, c/o American Embassy United Nations Avenue Gigiri Nairobi Sudan

<u>Country</u>	<u>Contact Name, title</u>	<u>Official Address</u>	<u>Commercial Address</u>
Tanzania	Dr. Sithara Batcha Mission CSHGP T.O. sbatcha@usaid.gov 255-22-266-8490 Ext. 8072	USAID Tanzania 686 Old Bagamoyo Rd. Msasani Dar es Salaam, Tanzania	USAID Tanzania 686 Old Bagamoyo Rd. Msasani Dar es Salaam, Tanzania
Togo	Paul Hoedom Sossa Senior Reproductive and Family Health Specialist psossa@usaid.gov 00-233-21-741-200 00-233-244-329-941	USAID/WARP Department of State Washington, DC 20521-2010	USAID/Togo(WARP) E. 45/3 Independence Avenue P.O. Box 1630 Accra, Togo
Uganda	Rachel Cintron PHN Officer rcintron@usaid.gov 011-256-41-306-574	USAID/Uganda 42 Nakasero Road Kampala, Uganda	USAID/Uganda 42 Nakasero Road Kampala, Uganda
Zambia	Dr. Oliver Lulembo olulembo@usaid.gov 260-211-254-303	USAID/Lusaka Department of State Washington, DC 20521-2310	USAID/Zambia Mission 351 Independence Ave Lusaka Zambia

EUROPE & EURASIA

Armenia	Astghik Grigoryan Project Management Specialist agrigoryan@usaid.gov 374-10-464-700	USAID/Yerevan Department of State Washington, DC 20521-2310	USAID Armenia 1 American Avenue Yerevan, 0082 Armenia
Azerbaijan	Tara Milani Health Development Officer tmilani@usaid.gov 994-12-498-1835 Ext. 114	USAID Azerbaijan 83 Azadlig Avenue Baku, Azerbaijan	USAID Azerbaijan 83 Azadlig Avenue Baku, Azerbaijan
Georgia	Tamara Sirbiladzde Health Specialist tsirbiladze@usaid.gov 995-32-778-540, 995-33-001-013	USAID/Tblisi Department of State Washington, DC 20251-7060	USAID Caucasus Mission 25 Atoneli Street Tblisi, Georgia

<u>Country</u>	<u>Contact Name, title</u>	<u>Official Address</u>	<u>Commercial Address</u>
Kyrgyzstan	Damira Bibosunova Health Specialist dbibosunova@usaid.gov 10-88-216-711-043-20	USAID/Bishkek Department of State Washington, DC 20521-2310	U.S. Embassy to Kyrgyz Republic 171 Mir Prospect Bishkek 720016 Kyrgyz Republic
Russia	Alyssa Wilson Leggoe Deputy Director Office of Health alleggoe@usaid.gov 7-495-728-5143	American Embassy/USAID/Moscow PSC 77 APO AE 09721	USAID/Russia American Embassy/Moscow 19/23, Novinsky Boulevard 121099 Moscow RUSSIA
Tajikistan	Malika Makhkambaeva Health Specialist mmakhkambaeva@usaid.gov 10-992-37-229-2000	USAID/Dushanbe Department of State Washington, DC 20189-7090	USAID/CAR/Tajikistan c/o U.S. Embassy Dushanbe 109-A Ismoil Somoni Avenue Dushanbe 734019 Tajikistan
Turkmenistan	Elena Samarkina Health Specialist esamarkina@usaid.gov 10-993-12-456-130	USAID/Ashgabad Department of State Washington DC 20521-6360	USAID Turkmenistan 1, Yunus Emre Str. International Business Center 744017, Ashgabad Turkmenistan
Ukraine	Leslie Perry lperry@usaid.gov 011-380-445-374-602	USAID Ukraine 19 Nizhniy Val, 04071 Kyiv, Ukraine	USAID Ukraine 19 Nizhniy Val, 04071 Kyiv, Ukraine
Uzbekistan	Ben Mills Health Officer bmills@usaid.gov 10-998-71-140-24-86	DOS/USAID 7110 Tashkent Place Washington, DC 20521	USAID Uzbekistan 3 Moyqorqhon Street 5th Block, Yunusobod District 100093 Tashkent Uzbekistan

<u>Country</u>	<u>Contact Name, title</u>	<u>Official Address</u>	<u>Commercial Address</u>
<u>LATIN AMERICA & CARIBBEAN</u>			
Dominican Republic	Angela Franklyn Lord Mission Technical Officer alord@usaid.gov 809-731-7014	USAID/Santo Domingo Unit #5541 APO AA 34041-5541	USAID/Santo Domingo Calle Leopoldo Navarro #12, Gazcue Santo Domingo Dominican Republic
Ecuador	Paulyna Martinez Program Development Specialist pmartinez@usaid.gov 593-2-398-5591	USAID Ecudaor Ave. Avigiras E12-170 y Ave. Eloy Alfaro	USAID Ecudaor Ave. Avigiras E12-170 y Ave. Eloy Alfaro
El Salvador	Silvia Gonzalez, Budget Analysy Strategic Development Office sgonzalez@usaid.gov 011-503-2501-3493	USAID/EI Salvador APO AA 34023	USAID EI Salvador c/o US Embassy Urbanizacion y Bulevar Santa Elena Antigua Cuscatlan, La Libertad El Salvador
Haiti	Reginalde Masse rmasse@usaid.gov 011-509-229-3166	USAID/Port-au-Prince Department of State Washington DC 20521	USAID Haiti U.S. Embassy, Tabarre 41 Tabarre Haiti
Honduras	Emma Iriarte Health Office eiriarte@usaid.gov 504-236-9320 Ext 4735	USAID/Tegucigalpa Unit# 2927 APO AA 34022	USAID, Oficina de Salud, Frente Consulado Embajada EEUU, Av. La Paz, Tegucigalpa HONDURAS
Nicaragua	Dr. Ivan Tercero Health Coordinator itercerta@usaid.gov 011-505-252-7203	American Embassy/USAID/Managua	USAID, Embajada Americanan, Lm 5.5 Carretera Sur, Managua Nicaragua
Peru	Luis Seminario Project Manager Office of Health lesminario@usaid.gov 511-618-1268	USAID/Lima Department of State Washington, DC 20521-3230	USAID/Peru Av. La Encalada s/n Monterrico, Surco Apartado Postal 1995, Lima 1 Lima, Peru

<u>Country</u>	<u>Contact Name, title</u>	<u>Official Address</u>	<u>Commercial Address</u>
<u>TB Category</u>			
<u>AFRICA</u>			
DR Congo	Michele Russell Health Officer mrussell@usaid.gov 243-81-950-0435	USAID/Kinshasa Unit 31550 APO AE 09828	USAID/DR Congo 198 Isiro Avenue Kinshasa/Gombe DR
Ethiopia	Mesrak Nadew, Dr. Public Health Specialist mnadew@usaid.gov 011-251-11-551-0088 Ext. 445	USAID/Ethiopia Riverside Building, Off Haile Gebereselasie/Olympia Road PO Box 1014 Addis Ababa, Ethiopia	USAID/Ethiopia Riverside Building, Off Haile Gebereselasie/Olympia Road PO Box 1014 Addis Ababa, Ethiopia
Mozambique	Jeri Dible Population, Health, Nutrition Officer jdible@usaid.gov 011-258-213-52066 Alfredo MacArthur Infectious Disease Advisor amcarthur@usaid.gov 011-258-213-522-106	JAT Complex, Rua 1231, No. 41, PO Box 73, Maputo, Mozambique	JAT Complex, Rua 1231, No. 41, PO Box 73, Maputo, Mozambique
Nigeria	Temitayo Odusote , Senior Manager, TB and Clinical Care todusote@usaid.gov Siana Tackett Deputy Team Leader stackett@usaid.gov 011-234-9-461-9300	USAID/Nigeria 7-9 Mambila Street, off Aso Drive Maitama, Abuja, Nigeria	USAID/Nigeria 7-9 Mambila Street, off Aso Drive Maitama, Abuja, Nigeria
South Africa	Nellie Gqwaru HIV/AIDS & TB Project Specialist ngqwaru@usaid.gov 011-27-12-452-2237	USAID/Southern Africa 100 Totius Street Groenkloof Pretoria, South Africa	USAID/Southern Africa 100 Totius Street Groenkloof Pretoria, South Africa

<u>Country</u>	<u>Contact Name, title</u>	<u>Official Address</u>	<u>Commercial Address</u>
Tanzania	Patrick Swai pswai@usaid.gov 011-255-22-266-8490 Ext. 8229	USAID Tanzania PO Box 9130 Dar Es Salaam, Tanzania	USAID Tanzania DHL International, Plot 12D Nyerere Road PO Box 3405 Dar Es Salaam +255-22-286-1000
Uganda	Rachel Cintron PHN Officer rcintron@usaid.gov 011-256-41-306-574	USAID/Uganda 42 Nakasero Road, Kampala, Uganda	USAID/Uganda 42 Nakasero Road Kampala, Uganda
<u>EUROPE & EURASIA</u>			
Russia	Nikita Afanasiev TB Control Program Manager nafanasiev@usaid.gov 011-7495-728-5000 Ext. 4943	USAID/Russia 19/23 Novinskiy Boulevard Moscow 121099, Russia	USAID/Russia 19/23 Novinskiy Boulevard Moscow 121099, Russia
Ukraine	Leslie Perry lperry@usaid.gov 011-380-445-374-602	USAID Ukraine 19 Nizhniy Val, 04071 Kyiv, Ukraine	USAID Ukraine 19 Nizhniy Val, 04071 Kyiv, Ukraine
<u>ASIA NEAR EAST</u>			
Cambodia	Dr. Chantha Chak Infectious Disease Team Leader cchak@usaid.gov 855-12-810-213	American Embassy/ USAID Box P APO AE 96546	USAID/ Cambodia Building No. 16/18, Street Samdeeh Mongkol lem (Street No. 228) Phnom Penh Cambodia
<u>LATIN AMERICA & THE CARIBBEAN</u>			
Brazil	Patricia Paine HIV-AIDS/TB Technical Advisor ppaine@usaid.gov 055-61-3312-7255	American Embassy/ Brasilia Unit 3500 USAID APO AA 34030	USAID/Brazil SES Avenida das Nacoes Quadra 801 Lote 3 Brasilia- DF-70403-900 Brazil

Annex E: Application Screening Form

FY 2009 RFA Child Survival and Health Grants Program Application Screening Form

Name of Applicant Organization: _____ Country applying for: _____

Duration of Program: _____ years Funding Category: ___New Partner ___Innovation ___Tuberculosis

Interventions (must include %): (Total = 100%)

IMM	IYCF	Vit A/ Micro- nutrient	CDD	PCM	Malaria	MNC	HIV/ AIDS	Child Injury Prev	TB	TOTAL
										100%

Resubmission (please circle): Yes No

Eligibility Criteria from RFA

Yes/No/NA (Page #) (Indicate yes, no, or not applicable; cite page # or location in application as appropriate):

1. _____ **Status 1: U.S. PVO registered, or in the process of registration, with USAID**
or
_____ **Status 2: U.S. non-profit NGO (New Partner applicants only)**
2. _____ **New Partner Category Applicant Financial Restriction:** Applicant is within USG funding restriction of ≤ 5 million in the last 5 fiscal years.
3. _____ **PVO/NGO proposes Cost Share at 25% of total budget (\$ _____)**
4. _____ Applicant has **Country Presence** (Attachments –include page numbers and signed document from host country government providing organization with legal status to operate in country)
5. _____ **Health Development Experience** (Innovation & TB Category Applicants): Applicant demonstrates at least 5 years of relevant **health development experience**
6. _____ **Eligible Country** (Proposed program is in an eligible country, see RFA eligible country lists)
7. _____ If **two applications** are submitted by the organization, one is submitted in the Tuberculosis category.
8. _____ Applicant has no more than 5 cooperative agreements with CSHGP as of Oct. 1, 2009
9. _____ If **HIV/AIDS** is proposed in New Partner or Innovation Categories, it is at a level of effort not higher than **30%**.
10. _____ If **Tuberculosis** is proposed as a technical intervention area, it is within a submission for the Tuberculosis Category.
11. _____ Application is **30 pages** or less (excluding attachments, preliminary matter, and this screening form).

Point of Contact at Applicant Organization for Notification of Application Status: _____

Address, Phone Number, Email for notifying Applicant of Application Status:

Annex F: Beneficiary Calculation Guidelines

Beneficiary population numbers help reviewers determine if proposals target a reasonable number of people in relation to the project area and proposed interventions. Beneficiary population numbers are also used to calculate cost per beneficiary. For its annual portfolio review, CSHGP must report on the total number of beneficiaries reached by all the grants during the year and the total number of beneficiaries reached by the program since its inception in 1985. Grantees need to know the number of beneficiaries in order to plan activities on a yearly basis and over the life of the project. This document contains recommended guidance to help applicants report beneficiary numbers in a standardized manner.

It is expected that CSHGP projects, either directly or indirectly, benefit all children less than 5 years and women of reproductive age (15-49) in the project area; therefore, for these grants the following definition of the beneficiary population is used:

Definition: a beneficiary is a child under the age of 5 or women of reproductive age (15-49) who lives in the project target area.¹²

Guidance:

- Applicants must provide information on beneficiary population based on the population in the target geographic area (or areas) ***at the beginning of the project.***
- Applicants must state the source of population numbers for the project area, the date when this information was collected, and information as to whether or not these numbers were determined by official projections. For example, did they perform a census of the project area or did they use an official source? How did they determine the percent of total population for women of reproductive age and children under 5 (broken down by age categories)? The following are links to official sites for population figures:
 - CENSUS BUREAU SITE: <http://www.census.gov/ipc/www/idb/index.html>
 - UNICEF: <http://childinfo.org/>

Illustration of Beneficiary Calculation for Project X:

Explanation of calculation: Numbers are calculated before the initiation of the project. The Project X team calculated the population breakdown based on official guidance from the regional health office, which stated that of the total population in the district where the population operates, 4% are infants 0-11 months, 4% are children 12-23 months, 20% are children 0-59 months, and 22% are women of reproductive age (15-49). They obtained the total population numbers from the National Census Bureau.

¹² Infectious TB cases, which are found in adults, are the primary target population for TB category applications.

Beneficiary Population Numbers for Project X:

Beneficiary Population	Number
Infants: 0-11 months	5,193
Children: 12-23 months	5,193
Children: 24-59 months	15,580
Children 0-59 months	25,966
Women 15-49 years	28,561
Total Population	129,830

Annex G: Program Matrix

Example of a Program Matrix to Display Program Goals and Objectives

Goal: _____

OBJECTIVES	INDICATORS	MEASUREMENT METHODS	MAJOR PLANNED ACTIVITIES
* Objective 1	* indicator(s) * indicator * indicator	* measurement method(s)	* activity(s) * activity
* Objective 2	* indicator * indicator	* measurement method * measurement method	* activity * activity
* Objective 3	* indicator * indicator		* activity * activity

Definitions

Goal: A statement of the long-term aim of the project. While the complete fulfillment of a goal may not be possible or verifiable within the life-span of the project, the achievement of the project's more specific objectives should contribute to the realization of the goal.

Objective: A statement of what the program plans to achieve during the life of the project. This achievement is the highest level result that a program can materially affect with its efforts.

Indicator: An indicator specifies what is measured to determine whether the objective has been achieved. This includes both process and outcome.

Targets: A target is the planned value of the indicator at the end of the project (e.g., 70% of children fully immunized by project end). In the above matrix, targets can be stated in the objective statement or in the indicators. Illustrative, end-of-program targets should be provided in the application. If the program is funded, targets can be adjusted in the DIP according to baseline survey results.

Measurement Method: The measurement method identifies the source of the data for each of the identified indicators. (e.g., initial and final KPC Survey).

Planned Activities: Activities support the achievement of the objective. These include inputs, processes and outputs of the program.

Annex H: SF 424 Forms**Standard Form 424**

OMB Approval No. 0348-

0043

APPLICATION FOR FEDERAL ASSISTANCE		2. DATE SUBMITTED	Applicant Identifier NA
1. TYPE OF SUBMISSION:		3. DATE RECEIVED BY STATE	State Application Identifier
Application ____ Construction	Reapplication NA ____ Construction	NA	NA
__X__ Non-Construction	____ Non-Construction	4. DATE RECEIVED BY FEDERAL AGENCY	Federal Identifier NA
5. APPLICATION INFORMATION			
Legal Name:		Organizational Unit	
Address (give only county, state, and zip code):		Name and telephone number of person to be contacted on matters involving this application (give area code)	
6. EMPLOYER IDENTIFICATION NUMBER (EIN):		7. TYPE OF APPLICATION: (enter appropriate letter in box)	M
8. TYPE OF APPLICATION __X__ New ____ Continuation ____ Revision If Revision, enter appropriate letter(s) in box(es) <input type="text"/> A. Increase Award D. Decrease Duration B. Decrease Award E. Other (specify): C. Increase Duration		A. State H. Independent School Dist B. County I. State Controlled Institution of Higher Learning C. Municipal J. Indian Tribe D. Township K. Individual E. Interstate L. Profit Organization F. Inter-municipal M. Other (specify) G. Special Dist.	
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: NA TITLE:		9. NAME OF FEDERAL AGENCY USAID/GH/HIDN	
12. AREAS AFFECTED (Cities, Counties, States, etc.):		11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:	
13. PROPOSED PROJECT	14. CONGRESSIONAL		

		DISTRICTS OF:	
START DATE	END DATE	a. Applicant NA	b. Project NA
15. ESTIMATED FUNDING:		16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?	
a. Federal	\$	a. YES. THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS REVIEW ON: DATE B. NO. <u> X </u> PROGRAM IS NOT COVERED BY E.O. 12372 <u> X </u> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW	
b Applicant	\$		
c. State	\$ NA		
d. Local	\$ NA		
e. Other	\$		
f. Program Income	\$		
g. TOTAL	\$		
17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT? <u> </u> Yes If "Yes", attach an <u> </u> No explanation			
18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.			
a. Type Name of Authorized Representative		b. Title	c. Telephone Number
d. Signature of Authorized Representative			e. Date Signed
APPLICATION FOR FEDERAL ASSISTANCE		2. DATE SUBMITTED	Applicant Identifier NA
1. TYPE OF SUBMISSION:		3. DATE RECEIVED BY STATE	State Application Identifier NA
Application <u> </u> Construction <u> X </u> Non-Construction	Reapplication NA <u> </u> Construction <u> </u> Non-Construction	4. DATE RECEIVED BY FEDERAL AGENCY	Federal Identifier NA
5. APPLICATION INFORMATION			
Legal Name:		Organizational Unit	

Address (give only county, state, and zip code):		Name and telephone number of person to be contacted on matters involving this application (give area code)	
6. EMPLOYER IDENTIFICATION NUMBER (EIN):		7. TYPE OF APPLICATION: (enter appropriate letter in box) M	
8. TYPE OF APPLICATION <div style="display: flex; justify-content: space-between;"> <u> X </u> New <u> </u> Continuation <u> </u> Revision </div> If Revision, enter appropriate letter(s) in box(es) <div style="display: flex; justify-content: space-between;"> A. Increase Award D. Decrease Duration </div> <div style="display: flex; justify-content: space-between;"> B. Decrease Award E. Other (specify): </div> <div style="display: flex; justify-content: space-between;"> C. Increase Duration </div>		<div style="display: flex; justify-content: space-between;"> A. State H. Independent School Dist </div> <div style="display: flex; justify-content: space-between;"> B. County I. State Controlled Institution of Higher Learning </div> <div style="display: flex; justify-content: space-between;"> C. Municipal J. Indian Tribe </div> <div style="display: flex; justify-content: space-between;"> D. Township K. Individual </div> <div style="display: flex; justify-content: space-between;"> E. Interstate L. Profit Organization </div> <div style="display: flex; justify-content: space-between;"> F. Inter-municipal M. Other (specify) </div> <div style="display: flex; justify-content: space-between;"> G. Special Dist. </div>	
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: NA TITLE:		9. NAME OF FEDERAL AGENCY USAID/GH/HIDN	
12. AREAS AFFECTED (Cities, Counties, States, etc.):		11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:	
13. PROPOSED PROJECT		14. CONGRESSIONAL DISTRICTS OF:	
START DATE	END DATE	a. Applicant NA	b. Project NA
15. ESTIMATED FUNDING:		16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?	
a. Federal	\$	a. YES. THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS REVIEW ON: DATE B. NO. <u> X </u> PROGRAM IS NOT COVERED BY E.O. 12372 <u> X </u> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW	
b Applicant	\$		
c. State	\$ NA		
d. Local	\$ NA		
e. Other	\$		

f. Program Income	\$	
g. TOTAL	\$	
17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT? _____ Yes If "Yes", attach an explanation _____ No		
18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.		
a. Type Name of Authorized Representative	b. Title	c. Telephone Number
d. Signature of Authorized Representative		e. Date Signed

Standard Form 424 (REV 4-92); Prescribed By OMB Circular A-102

INSTRUCTIONS FOR THE SF 424

Public reporting burden for this collection of information is estimated to average 45 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0043), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET, SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

This is a standard form used by applicants as a required facesheet for preapplications and applications submitted for Federal assistance. It will be used by Federal agencies to obtain applicant certification that States which have established a review and comment procedure in response to Executive Order 12372 and have selected the program to be included in their process, have been given an opportunity to review the applicant's submission.

Item: Entry:

1. Self-explanatory.
2. Date application submitted to Federal agency (or State if applicable) & applicant's control number (if applicable).
3. State use only (if applicable).
4. If this application is to continue or revise an existing award, enter present Federal identifier number. If for a new project, leave blank.
5. Legal name of applicant, name of primary organizational unit, which will undertake the assistance activity, complete address of the applicant, and the name and telephone number of the person to contact on matters related to this application.
6. Enter Employer Identification Number (EIN) as assigned by the Internal Revenue Service.
7. Enter the appropriate letter in the space provided.
8. Check appropriate box and enter appropriate letter(s) in the space(s) provided:
 - "New" means a new assistance award.
 - "Continuation" means an extension for an additional funding/budget period for a project with a projected completion date.

- "Revision" means any change in the Federal Government's financial obligation or contingent liability from an existing obligation.

9. Name of Federal agency from which assistance is being requested with this application.

10. Use the Catalog of Federal Domestic Assistance number and title of the program under which assistance is requested.

Item: Entry:

11. Enter a brief descriptive title of the project. If more than one program is involved, you should append an explanation on a separate sheet. If appropriate (e.g., construction or real property projects), attach a map showing project location. For preapplications, use a separate sheet to provide a summary description of this project.

12. List only the largest political entities affected (e.g., State, counties, cities).

13. Self-explanatory.

14. List the applicant's Congressional District and any District(s) affected by the program or project.

15. Amount requested or to be contributed during the first funding/budget period by each contributor. Value of in-kind contributions should be included on appropriate lines as applicable. If the action will result in a dollar change to an existing award, indicate only the amount of the change. For decreases, enclose the amounts in parentheses. If both basic and supplemental amounts are included, show breakdown on an attached sheet. For multiple program funding, use totals and show breakdown using same categories as item 15.

16. Applications should contact the State Single Point of Contact (SPOC) for Federal Executive Order 12372 to determine whether the application is subject to the State inter government review process.

17. This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of debt include delinquent audit disallowances loans and taxes.

18. To be signed by the authorized representative of the applicant. A copy of the governing body's authorization for you to sign this application as official representative must be on file in the applicant's office. (Certain Federal agencies may require that this authorization be submitted as part of the application.)

Budget Information - Non-Construction Programs

SECTION A - BUDGET SUMMARY						
Grant Program Function Or Activity {a}	Catalog of Federal Domestic Assistance Number {b}	Estimated Unobligated Funds		New or Revised Budget		
		Federal {c}	Non-Federal {d}	Federal {e}	Non-Federal {f}	Total {g}
1. Headquarters	\$ N	\$ NA	\$ NA	\$	\$	\$
2. Field	N	NA	NA			
3. NA	N	NA	NA	NA	NA	
4. NA	N	NA	NA	NA	NA	
5.TOTALS	\$ N	\$ NA	\$ NA	\$	\$	\$
SECTION B – BUDGET CATEGORIES						
6. Object Class Categories		USAID PROGRAM		RECIPIENT FUNDS		Total {5}
		(1) Federal	(2) Non-	{3}	{4}	
a. Personnel (1)		\$	\$	\$ NA	\$ NA	\$
b. Fringe Benefits (1)				NA	NA	
c. Travel (1)				NA	NA	
d. Equipment (3)				NA	NA	
e. Supplies (3)				NA	NA	
f. Contractual (3)				NA	NA	
g. Construction N/A				NA	NA	
h. Other (1), (2) (see notes)				NA	NA	
i. Total Direct Charges (sum of 6a-6h)				NA	NA	
j. Indirect Charges (4)				NA	NA	
k. TOTALS (sum of 6i and 6j)		\$	\$	\$	\$	\$
7. Program Income						
		\$	\$	\$	\$	\$